

AGENDA MANAGEMENT SHEET

Name of Committee Cabinet

Date of Committee 06 October 2005

Report Title Report of the Mental Health Panel on
Mental Health Provision in Warwickshire

Summary The Health Overview & Scrutiny Committee had considered the report of the Mental Health Panel that reviewed Mental Health provision in Warwickshire. The Committee endorsed the report and recommendations.

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Would the recommended decision be contrary to the Budget and Policy Framework? No.

Background papers None

CONSULTATION ALREADY UNDERTAKEN:-

Details to be specified

- Other Committees
- Local Member(s) -
- Other Elected Members Councillors Anne Forwood and Marion Haywood
- Cabinet Member Councillor Bob Stevens
- Chief Executive
- Legal Victoria Gould/David Carter
- Finance
- Other Chief Officers
- District Councils
- Health Authority

Police

Other Bodies/Individuals

FINAL DECISION YES

SUGGESTED NEXT STEPS:

Details to be specified

Further consideration by this Committee

To Council

To Cabinet

To an O & S Committee

To an Area Committee

Further Consultation

Cabinet - 06 October 2005.

**Report of the Mental Health Panel on Mental Health
Provision in Warwickshire**

**Report of the Chair Health Overview and Scrutiny
Committee**

Recommendation

That the Cabinet consider and make a response to the Health Overview and Scrutiny Committee's recommendations arising from its consideration of the Mental Health Panel report reviewing mental health provision in the County.

1 Introduction

- 1.1 As part of the Health Overview and Scrutiny Committee's programme of work for 2003-2005, the Committee established a panel to review mental health provision in the County. This followed on from an extensive consultation with the statutory and voluntary sector to identify initial issues to be scrutinised.
- 1.2 The Panel comprised three County Councillors – Jerry Roodhouse (Chair), Councillor Sid Tooth and Councillor Helen McCarthy – and two members selected from the five additional members nominated by the five Warwickshire Borough/District Councils – Councillors Jane Harrison (Stratford-on-Avon) and Richard Meredith (North Warwickshire). The Panel first met on the 13th October 2004 and carried out the main work of the review between November 2004 and April 2005.
- 1.3 The Panel reported to the Health Overview and Scrutiny Committee on the 27th July 2005. Copies of that report and the background papers have been deposited in the Group Rooms and at the main reception to the Shire Hall offices off the Market Place. Those papers can also be found on the Warwickshire Web (www.warwickshire.gov.uk/committee-papers) with the papers for today's Cabinet meeting and those for the Health Overview and Scrutiny Committee on the 27th July 2005.

2. Key Findings

- 2.1 The review identified that there were a multitude of care packages for those with mental health needs but concerns had been raised on whether the agencies that provided care and support always linked with each other. The panel considered that the initial contact and the links between service providers were very important. This ensured that those with mental health needs and their carers could easily access services to help them remain or gain employment, obtain education/training, access benefits and appropriate housing. Social Services produced *Café Chat*, a quarterly publication with a regularly updated list of contacts, which could be made available to community leaders.
- 2.2 The complexity of Mental Health provision in Warwickshire must make it difficult for service users and carers to know what was readily available or where to go to seek help. It appeared to be very reliant on the GP making a referral and agencies providing information in a consistent manner. Transitional arrangements highlighted the differences in the information given. The transition from children to adult services and from working age to retirement caused problems for the client. Although the review had concentrated on those likely to be in employment, some work needed to be done to ensure that clients received a seamless service regardless of age.
- 2.3 It was important for mental health services to make the links with mainstream activities through:
- Social Inclusion Agenda
 - Training at all levels
 - Sustainability of funding
 - Housing
 - Recreational activities Warwickshire Art Action Zone
- The panel wanted to ensure that there was consistency and equity of access to these services.
- 2.4 The review had identified that those from the BME population did not appear to attend day services partly due to the stigma they attached to mental illness. Recommendations from the 'Bennett Inquiry' report, had instigated the review of mental health provision for the BME population. The panel wanted this good work to carry on and the BME population to continue to have their mental health needs assessed. Hopefully, in time, this would encourage a greater take-up of services from the BME population.
- 2.5 Services such as Springfield Mind and the Resource Cafes provided the means for those wanting to access other health service/social services provision. Springfield Mind was intending to use the Smoking Cessation Services to help their clients to stop smoking if they so wished. These venues provided an ideal opportunity for services to come to the client to provide treatment and support. Also there were cases where physical health concerns had been attributed to mental health problems.
- 2.6 The review had identified that there was considerable support being offered to those with mental health problems to remain in work or access

employment. However, there was evidence to indicate that stigmatism was attached to mental health and more work with employers and employees could help reduce stigmatism in the workplace.

- 2.7 A mental health event was held in February 2005 at Benn Hall, Rugby. Ninety delegates attended the event, including representatives from the statutory and voluntary organisations as well as carers and service users. Some problems were identified with the links being made between the statutory and voluntary organisations. Several delegates at the event thought that an annual event where they could network and discuss any concerns would be very helpful.
- 2.8 There were still areas in the scope that were not covered by the review. The information required involved the numbers of patients, waiting times and staffing levels.
- 2.9 A number of key priorities came out of the workshops at the mental health event.
- 2.10 The review identified that the commissioning of services for 3 years causes problems for agencies such as Springfield Mind.

3. Recommendations of the Panel

- 3.1 The Panel made the following recommendations:-
- (i) That information on existing mental health resources available via 'Supporting People' and Durham Mapping (Durham University Website) be used to highlight what provision was available in Warwickshire. This information could be used alongside other health and well-being data in Warwickshire's 'Quality of Life Report', which was published annually by the Research Team in PTES. This information, if updated annually, would form part of the County Council's monitoring of health related issues. However, this would require a commitment from the PCTs and Social Services, as joint providers, with 'Supporting People' to contribute to this process.
 - (ii) That a handbook or a CD-ROM about service provision for those with mental health needs be made readily available for community leaders (County, Borough and District Councillors, Vicars, etc.). *Café Chat* had a page devoted to contact information for mental health provision. The suggestion was that Social Services could be the lead body to take this forward.
 - (iii) That the PCTs and Social Services review how information was provided to users and carers to reduce confusion in how the transitional arrangements were implemented and they ensured there was consistency in the information given. (To be reviewed in 2nd phase)

- (iv) That mental health providers link in with the community plans with the aim to improve mental health provision in the county.
- (v) That both PCTs (North and South Warwickshire) with a responsibility for mental health provision continue with the mental health needs assessment of the BME population to encourage a better take-up of mental health services by the BME population.
- (vi) That the PCTs help promote healthy living activities to users and carers because there was a danger that other health concerns tended to be attributed to mental health problems. PCTs should be actively engaging in providing services such as smoking cessation or sexual health to users and carers. Also regular health checks should be encouraged such as blood pressure, blood sugar or cholesterol levels.
- (vii) That Warwickshire County Council and the Borough and District Councils hold a 'Mental Health Awareness Raising Day' to help employers and employees understand what it was like to suffer from mental health problems. Human Resources or Personnel Departments to take the lead.
- (viii) That an annual event be held with all mental health service providers, service users and carers. Supporting People were willing to take the lead, but they would need to discuss arrangements, funding and the way forward with other mental health service providers.
- (ix) That the review continues to a 2nd phase of the review, which will include the areas not covered by the review and look more thoroughly at issues such as the transition arrangements such as children to adult and adult to older people services and the possible implications of the new Mental Health Act on provision.
- (x) The event highlighted that there were a number of providers in Warwickshire that supported those with mental health needs such as housing, benefits, support in the workplace. That these providers evaluate their services to identify gaps in provision and where appropriate implement the key priorities raised at the event.
- (xi) That benefits should be assessed by sympathetic and appropriately qualified staff and should be at accessible but inviting venues. Staff to be made aware of the difficulties in completing complex forms. Also having to travel long distances to uninviting venues can be daunting and expensive for those with mental health problems. The panel recognised there was a move towards providing information via 'one stop shops', however they wanted to ensure that staff had adequate training to help those with mental health needs.
- (xii) Commissioning services for the voluntary sector on the basis of a contract for 3 years was too short. That a move to commissioning services for five years for smaller charities would help reduce staff

time and costs. Initial discussions with the PCTs indicated that they would be happy to commission services for a longer period.

4. Health Overview and Scrutiny Committee comments

- 4.1 The Committee endorsed the report and the recommendations and agreed to refer the report and their recommendations to the Cabinet for consideration.
- 4.2 It was agreed that the Mental Health Panel should move into a second stage of its review and take on board changes to mental health provision in the County (including relationship between the PCTs and the acute sector and any inequalities in funding across the County). This would also address the transitional issues highlighted during the first phase involving children moving into adult services and adults moving into older people services.
- 4.3 The Committee also agreed to send the recommendations to the three Primary Care Trusts and five Borough/District Councils in Warwickshire and to ask for their responses within 28 days
- 4.4 Finally the Committee agreed to seek a presentation in the autumn with regard to the proposed changes to mental health service provision in the County.

JERRY ROODHOUSE
Chair Health Overview and
Scrutiny Committee

Shire Hall
Warwick

09 August 2005