

DELIVERY AND SUPPORT UNIT  
UNED CYFLENWI A CHYMORTH

# Mental Health Services

EE 27/04/10



## Presentation overview

- Role of DSU: performance management
- Mental Health Service Model(s) Wales
- Challenges / Issues
- Key Messages

## Role of DSU

- To provide support to organisations in improving performance to meet ministerial targets which is sustainable & improves the patient experience (includes enhanced support, expert advice, performance management tools, management techniques)
- Act as a Change Agent strengthening the enablers and working round the blockers within organisations

## DSU Intervention

- Intervention influenced by organisation performance
- Assess and diagnose against best practice
- Identify enablers / blockers
- Develop Action Plan
- Actively get in amongst services to initiate and support change
- Support organisations to share learning

Underpinning DSU involvement is consideration of:

- The principles of the All Wales Mental Health Strategy (2001) ie. 'Equity, Empowerment, Effectiveness, Efficiency'
- &
- Whether a comprehensive community focussed model of care as per the targets of 'All Wales Mental Health Strategy' will be achieved across all organisations in Wales by 2011

# Mental Health Service Models

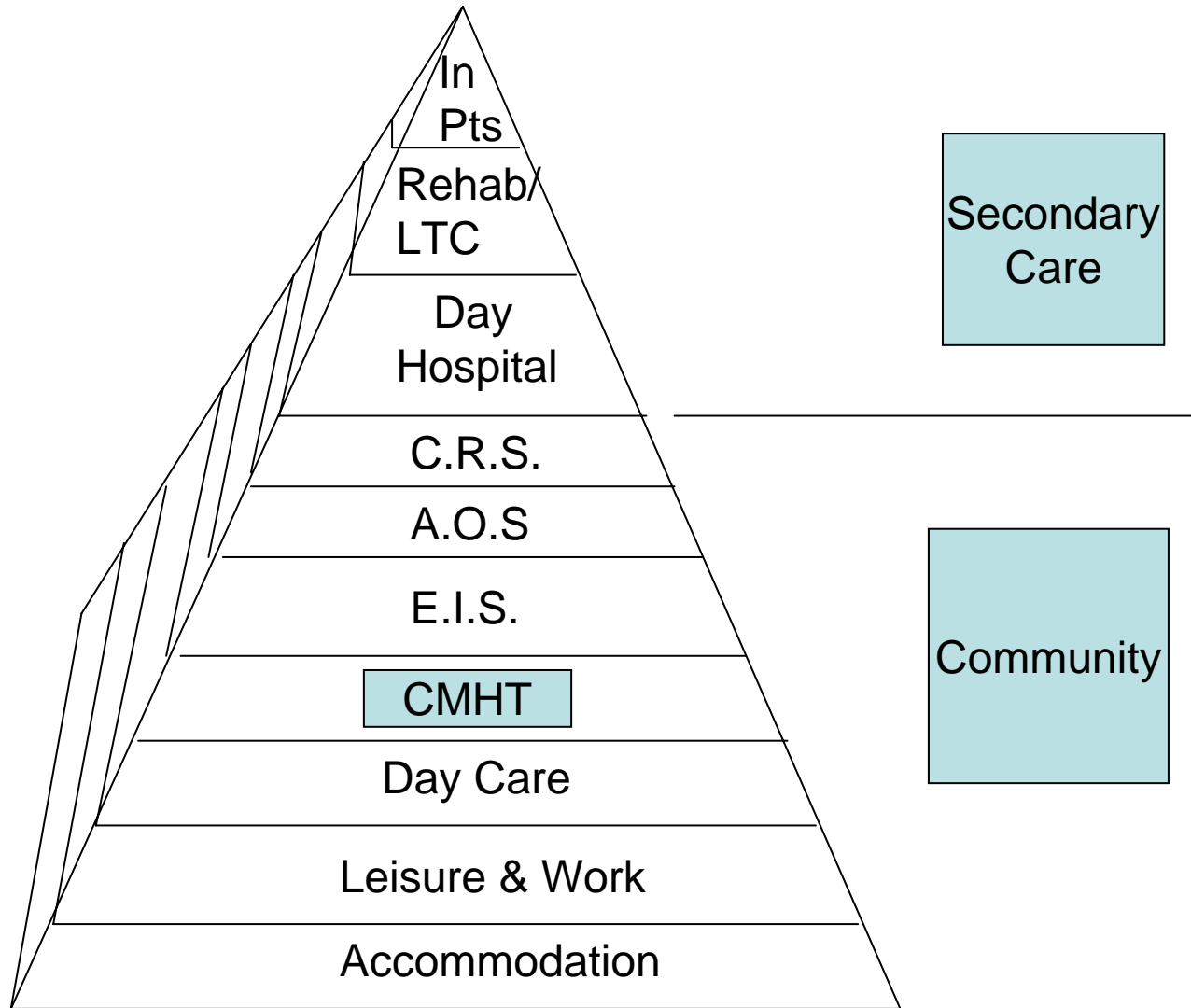
Influenced by several Policy Documents ie.

- NHS and Community Care Act ,
- All Wales Mental Health Strategy,
- D4L,
- Mental Health NSF's

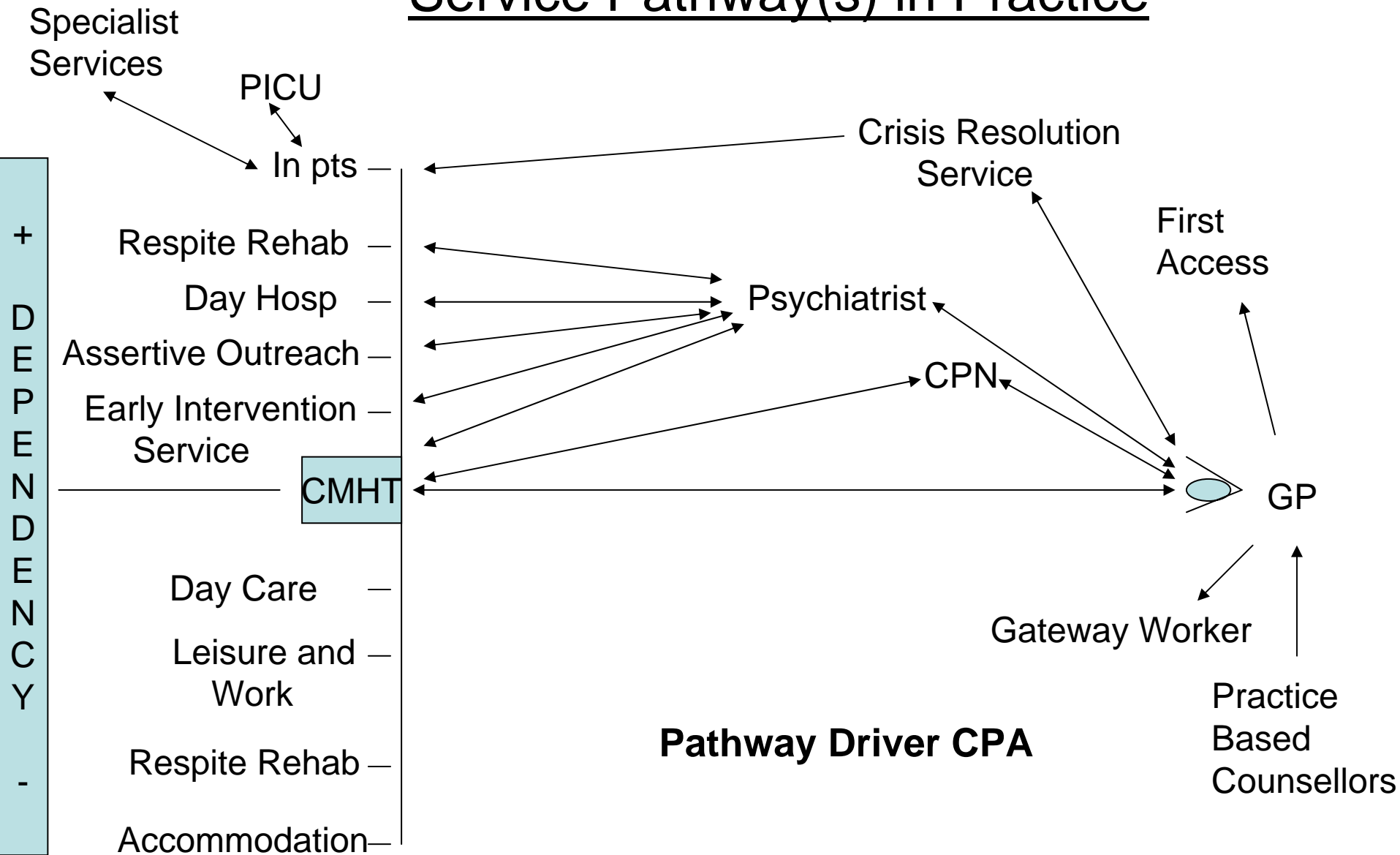
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Main direction of mental health policy to change service delivery from an institutional model to an integrated community focussed model of care.

# Mental Health Service Model

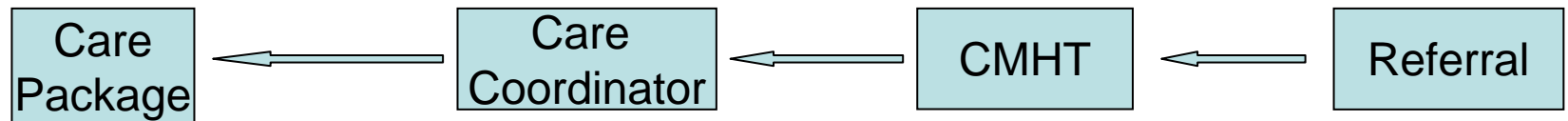


# Service Pathway(s) in Practice



# Care Programme Approach (CPA)

## CPA Process



Care  
Coordinator  
Accountable  
Manages  
Associate  
Referrals  
Monitoring /  
Evaluation/  
discharge

Undertake  
Assessment  
Coordinate  
Care package

Multi-disciplinary  
Team  
Confirms acceptance  
of referral  
Allocates  
Care Coordinator

Usually  
Medical

### **Controls**

CPA requirements ie. designated care coordinator risk assessment, care plan,, monitoring / review arrangements etc.

## Good Practice

- Generally, organisations have made significant progress in transforming local service models into a community focussed model of care
- Lots of evidence of good practice across Wales in both an inpatient and community setting in various aspects of the service delivery pathways which includes practice that has national recognition.

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# Challenges / Issues Mental Health

## Challenges / Issues

- Targets are not always outcome focussed ie. Expectation to (commission?) this means that services are often put in place with no specific requirement for service change, clinical, financial outcome, demand / capacity planning.
- Targets have tended to focus on structure not outcomes e.g. C.M.H.Ts, Crisis Resolution Service, Assertive Outreach Service, Early Intervention Service.

## Contd

- Planning agenda variable
- Delivery of AOF targets in rural area challenging, seemingly as a consequence of disparate spread of population / critical mass

Medium Secure



Complex Care / Low Secure



In pts

Rehab/  
LTC

Day  
Hospital

C.R.S.

A.O.S

E.I.S.

CMHT

Day Care

Leisure & Work  
Accommodation

Secondary  
Care

Community

+ D E P E N D E N C Y  
L E V E L S  
-



Demand  
And  
Supply  
Not  
Managed  
Effectively!!

## Challenges / Issues contd.

- Service models vary across Wales and are at different stages of implementation - Varying types of care available 24/7
  
- Service models/delivery not set up to meet changing demands / changing case mix :—
  - more people with sub misuse / mental health problems anecdotally increase in patient settings from 5-15% (2000) to 40-70% (2007)
  
  - more people (age 65+) with mental health and physical problems, lack of age appropriate services for younger people with dementia
  
  - physical well being poorer than general population

## Challenges / Issues contd.

- Increase in numbers of people with challenging behaviour requiring low secure care. High cost / low volume. Out of area treatment (OATS) +++
- Limited data to inform on changing case mix / changing demands
- Limited local capacity to deliver services to effectively meet changing needs

## Challenges / Issues contd.

- Acute in patient service / CMHT used as catchall to meet changing demand where organisation services models are not comprehensive or complete.
- Preparation of clinical staff to undertake new roles within modernisation agenda variable

## Challenges / Issues contd.

### *Implementation of CPA inconsistent across Wales (DSU/NLIAH Review 2009)*

#### Key findings:

- Several information systems creating duplication of effort (Health, Health / Social Care)
- Bureaucratic process effecting clinical / professional time
- Inconsistent coordination of care

## CPA Findings contd.

- Risk assessment /management variable
- Limited evidence of outcome focussed care plans
- Limited or no evidence of effective caseload management processes in place

## Challenges / Issues contd.

- Limited or no process for identifying / managing unmet need / new demands
- Consumer experience ?
- Reviews, reviews, reviews

## Summary

- Differing understanding about expectations from policy to commissioning/planning to service delivery
- Service models variable across Wales
- Effective delivery of mental health agenda is variable
- Service demands changing with limited controls / limited service responses in place

## Summary Contd.

- Performance Management agenda not always outcome focussed
- Consumer experience variable

## Key messages

- Need to ensure a common understanding about the model of mental health care in order to measure variation. Existing NSF (AOF Targets) has not done this effectively. Focus has tended to be on key achievements
- Need to identify capacity and capability to deliver service models ie. Planning / Service Delivery and support accordingly.
- Need to develop and implement standardised data collection system to inform on changing need , support service models.

## Contd.

- Need to achieve effective coordination of CPA to ensure peoples needs are met appropriately and that people receive the right care at the right time in the right place. Supports planning and service delivery from inpatient to community care. Performance manage process
- Need to develop and introduce gate keeping policy for access and patient transfers through general and secure mental health services. Performance measure care episodes, transfer arrangements
- Need to assess and further develop systems that ensure Quality of Care

## On horizon:

LHB Boards will need to:

- Consider the impending WAO follow up review findings and ensure that the required actions are included in a robust Local Delivery Plan (draft WAO report to be sent to LHBs April/May 2010).
- Meet AOF requirements. AOF Targets to remain the same for 2010/11 to ensure organisations achieve Mental Health Strategy / AOF objectives
- Ensure organisation is prepared to meet Legislative Competency Order (LCO) requirements 2010/11