

# interface

linking mental health and wellbeing in Surrey

## Interface 06

Interface is the official news brief for Surrey's Local Implementation Team (LIT). The LIT, with input from four Stakeholder groups across the county is a review and decision-making body for mental health services in Surrey. Interface is published to share information amongst a wider network and headline important developments in mental health services in Surrey.

The LIT, with a membership of patients/service users, carers, providers and commissioners aims to bring the very best mental health treatment and care to the people of Surrey.

Find out more at [www.surreylit.org.uk](http://www.surreylit.org.uk)

## Membership of Surrey LIT

Diane Woods	Associate Director MH/LD, SPCT	- joint chair
Donal Hegarty	Policy & Commissioning Manager, SCC	- joint chair
Janine SandersonMH	Commissioning Manager, SPCT	
Joanne Alner	Public Health representative	
Megan Aspel	Project Director, Let's Link charity/Editor of Interface (LIT news brief)	
Dr N T Attard	Consultant Psychiatrist (LD) SaBPFT	
Anthony Byrne	Surrey Heath & NE Hants Stakeholder Group	
Stuart Craig	North West Surrey Stakeholder Group chair	
Andy Edeleanu	Specialist Therapy Director, SaBPFT	
Fiona Edwards	Chief Executive SaBPFT	
Dr Malcolm Hawthorne	Consultant Psychiatrist MH/ Medical Director SaBPFT	
Tracey Hayes	Member North West Surrey Stakeholder Group	
Anne Heath	Surrey Community Health Service (PCMH)	
Don Illman	East/Mid Surrey Stakeholder Group chair	
Diane Luck	Carer representative, RETHINK	
Dominic Parkinson	Richmond Fellowship Trust	
Dr Jill Rasmussen	GP & PEC lead for MH/LD	
David Rye	Voluntary Sector representative, MIND	
Michael Sellors	Independent service user involvement co-ordinator	
Clive Stone	Guildford & Waverley Stakeholder Group, chair	
Mike Wilson	Carer representative	
Geoff Upfold	Surrey Heath stakeholder group member	

## Notes from Surrey LIT meeting – May 2009:

## National Service Framework (NSF) self-assessment

The NSF now in its 10<sup>th</sup> and final year set out key standards for mental health services in 1999. Health commissioners and providers across the country had to ensure improvements and developments were made to and within services, in line with the NSF standards.

The way local authorities assessed how well they were doing was to look at the indicators set by the NSF and 'score' red, amber or green. It was important to consult as broadly as possible with patients/service users, carers and statutory and voluntary providers. To do this, the LIT and Stakeholder groups were established.

Surrey has just completed its self-assessment for 2008-2009. Meetings took place with representatives from each Stakeholder Group to get a local view and results were aggregated through the Surrey LIT to finalise the assessment.

Each NSF indicator has three possible outcomes with very clear criteria to guide the LIT as to whether a service or system has achieved a red, amber or green 'score'. The criteria can present difficulties sometimes as people may feel a service is working well in one area of the county but not so well elsewhere. Discussion and feedback, particularly from the Stakeholder Groups, ensure a consensus is reached that reflects the Surrey-wide picture of mental health services.

Over the past ten years, Surrey has incrementally improved. As primary care trusts and mental health provider trusts became NHS Surrey and Surrey & Borders Partnership NHS Foundation Trust respectively, services have become more equitable and person-centred.

## Headlines from the Surrey LIT meeting in May 2009

The main purpose of the meeting in May was to agree the ratings for the 2008-2009 NSF Self Assessment targets. Each Stakeholder Group or representatives from the groups had met to discuss the indicators and decide whether they warranted a red, amber or green 'score'. The LIT needed to aggregate each group's self-assessment to create the overall outcome for Surrey. See the results on the next page. Other news from the meeting included:

Updates on LIT Business Items:

**IAPT** – commencement of the project has begun and Practice Based Commissioning (PBC) leads engaged. The new NHS Surrey Programme Board (involved in making decisions around service specifications) will provide highlight reports to and link with the LIT around an IAPT governance structure.

**NICE Schizophrenia Guidance Update** – was distributed. It was commented that further emphasis on annual health checks was necessary.

**New Crisis Helpline leaflet and poster** – the LIT felt that there was a need for callers to be able to text and email the service. This is in hand.

**Review of Carer's Services** (in Adult Mental Health) – a group has been set up to focus on an evidence based review of the availability and quality of services for carers, provided by Surrey County Council. Following work over the next three months, the group will develop a framework pathway for carers, to which all mental health services should be able to subscribe.

**Community services, West Surrey** – a group has been formed to gather information on services providing vocation, training and employment in West Surrey. This will include looking at current availability and equity in the area and planning for the future with voluntary sector providers.

## **Stakeholder group reports**

**Guildford & Waverley:** access to advocacy in the west was discussed at their last meeting. It was clarified that Matrix was the service to access. Matrix provides general advocacy and Independent Mental Health Advocacy (IMHA), which is more specific e.g. to people detained under the Mental Health Act

**Surrey Heath & North East Hampshire:** the group had a positive meeting around the self assessment and were now looking at the development action plan. Concern was expressed however around the current economic crisis and therefore the need for careful planning and prioritisation.

**Mid and East Surrey:** discussion around the practicalities of how the crisis resolution team/service works raised concerns about carers being able to access the crisis line on behalf of someone in need. It was confirmed at the LIT that carers can call and a risk assessment would be carried out, regardless of whether the person at risk would come to the phone. Whilst not yet in place due to some technical difficulties, a text and email facility will soon be available for the Crisis line.

**North West Surrey:** the group were pleased to see that Direct Payment workshops had been organised at various voluntary provider sites, but would like to see more organised for a wider population. Members had expressed concern about older adults and were informed that there is now an Older Adults Mental Health steering group.

All Stakeholder groups had discussed the economic downturn and how this will affect services. Whilst there are significant cost savings to be made, Diane Woods from NHS Surrey explained that there has been additional investment from the government around IAPT and this will help support areas around vocation and employment.

### **National Service Framework Self Assessment '08-'09**

With 20 green scores, 11 amber and only 2 red, Surrey's mental health commissioners and providers have demonstrated their determination to meet the criteria for all 33 NSF indicators.

There is much work still to do and the LIT discussed where action plans were needed to further improvements to services. The future focus will be on quality and how this can be monitored and achieved to create visible and meaningful patient/person centred care.

### **The results:**

Indicators that achieved Green: (please see Glossary for abbreviations)

Early Intervention in Psychosis; Assertive Outreach; Acute In-patient Care; Implementing Delivering Race Equality (DRE) in MH care policy; BME Community Development Workers; Governance; Commissioning for Third Sector; Suicide Prevention – PCT and Providers; MH Act Section 135/136 places of safety; Mental Capacity Act; MH Act 2007; Improving Access to Psychological Therapies; Prison MH; Abuse question in assessment documentation; Older People MH – Commissioning.

The following were scored green but with an Action attached, for instance, to undertake a service user led/involved assessment on quality or accessibility:

Crisis Resolution & Home Treatment service; Employment of service users; MH services of people with learning disabilities; MH Promotion – Strategy & Implementation

### Indicators that achieved Amber:

All the indicators that achieved amber required more work or needed to be fully functional across the county before a green score could be awarded. Actions were needed to ensure amber indicators were developed and improved.

**Social Inclusion**, the Stakeholder groups questioned whether the commissioning documents were in place. It was agreed more work needed to be done

**Vocational support**; supported employment services are working well in Surrey and more provision is coming on stream for the whole of the county. Action: the LIT to look at a vocational strategy to ensure a visible and equitable service

**Delivering Race Equality – BME services**; a lack of knowledge by Stakeholder Group members hampered making an informed decision around this indicator. Action: data gathered by SaBPFT would be validated through the LIT and fed back to the relevant CDWs, and data from GPs would also be explored.

**Recovery**; services should be recovery oriented. Whilst there was agreement that some indications suggested this was being achieved, patients/service users and carers didn't always feel that they were receiving recovery based services. Action: outcome monitoring through the Stakeholder groups with regular reporting to the LIT

**Service User Involvement**; ongoing challenges remain around ensuring a wide range of people who use services participate in service planning and development. Action: NHS Surrey will look at getting information to a wider audience and Stakeholder Groups will canvas the views of service users.

**Carer involvement**; similar concerns to service user involvement were expressed. Action: involving carers in the service user led monitoring of services would be explored.

**Personality disorder services (PD)**; because of significant concerns around this criteria, an action was agreed to refresh the PD strategy on a wider scale and re-visit areas previously identified for development

**Older People MH – service delivery**; implementation plan to follow strategy in line with the document 'Everybody's Business'

**Dual Diagnosis**; (mental health and substance misuse). It was felt the strategy did not reflect people's needs

**Commissioning MH services**; whilst there were definite improvements in this area, there was still a need for adequate monitoring and updating protocols

## Indicators that were scored Red:

**Advocacy**; this service is patchy in Surrey although the North West Stakeholder group felt they benefited from a very good service. Advocacy is due to be rolled out across the county, providing improved access for everyone

**Older People MH – Strategy**; a strategic review has been completed and a strategy was due but had not yet been agreed.

## Glossary

We will add to this list as more terms/acronyms arise

**SHO**.....Senior House Officer

**LIT**.....Local Implementation Team

**NHS Surrey**.....Surrey Primary Care commissioning trust

**SaBPFT**.....Surrey & Borders Partnership NHS Foundation Trust

**SCC**.....Surrey County Council

**NSF**.....National Service Framework

**DH**.....Department of Health

**SHA**.....Strategic Health Authority

**IMHA**.....Independent Mental Health Advocates

**LAA**.....Local Area Agreement

**LSP**.....Local Strategic Partnership

**QOF**.....Quality Outcomes Framework

**PBC**.....Practice Based Commissioning

**PIG**.....Policy Implementation Guidelines

**PEC**.....Professional Executive Committee

**PROMs**.....Patient reported outcome measures

**MH**.....Mental health

**MHA**.....Mental Health Act

**LD**.....Learning disabilities

**NICE**.....National Institute for Clinical Excellence

**RETHINK**.....National Mental Health Charity



Interface is produced for NHS Surrey and Surrey County Council by Let's Link, independent registered charity (no. 1075215)

Contact Megan Aspel at [megan.aspel@sky.com](mailto:megan.aspel@sky.com) or phone 07824 364703