

Timeline



May – August 2017 (phase 1)

We asked people who use services, those who care for them, those who deliver services, and the wider public; what is working well? What could be improved? What are the gaps in current services?

August 2017 - January 2018 (phase 2)

We looked through all of the feedback and research from phase 1 and agreed the key areas that need to be looked at in more detail in phase 3.

February 2018 – February 2019 (phase 3)

We formed six working groups to look at everything people had told us and develop options for how community mental health services could be delivered in the future. 8 community champions were involved in reviewing services. In June we organised a series of workshops and drop-in events. Targeted, face-to-face engagement took place with specific communities and groups from September – November.

March – April 2019 (phase 4)

This is when we finalise transformation plans to action all of the agreed recommendations from the review.

What needs to change?



We are proposing a new approach so people get the right support, in the right place, at the right time. Over time, a range of community services has evolved across B&NES. Organisations have tried to ensure that they work together and meet the range of needs of the whole of the local community but in the absence of a comprehensive and system-wide approach, this has not always been possible.

Our current approach focuses on experts organised around specific community service functions who work with you at different stages of your need. People have told us that it can be difficult to access the advice or care that best meets their needs quickly and easily. At the same time, it is not always easy for providers of services to know which other partner organisations might be most appropriate to offer additional support to an individual, their carer(s) or families.

Why did we review mental health services?



Bath and North East Somerset (B&NES) Council and Clinical Commissioning Group (CCG) have been looking at the way community mental health services are delivered locally, so we can decide what improvements need to be made. This builds on the priorities that were identified in the your care, your way review of community health and care services in 2015–17, and will help us to achieve positive changes in mental health and wellbeing provision for people living in B&NES.

What is our new approach?

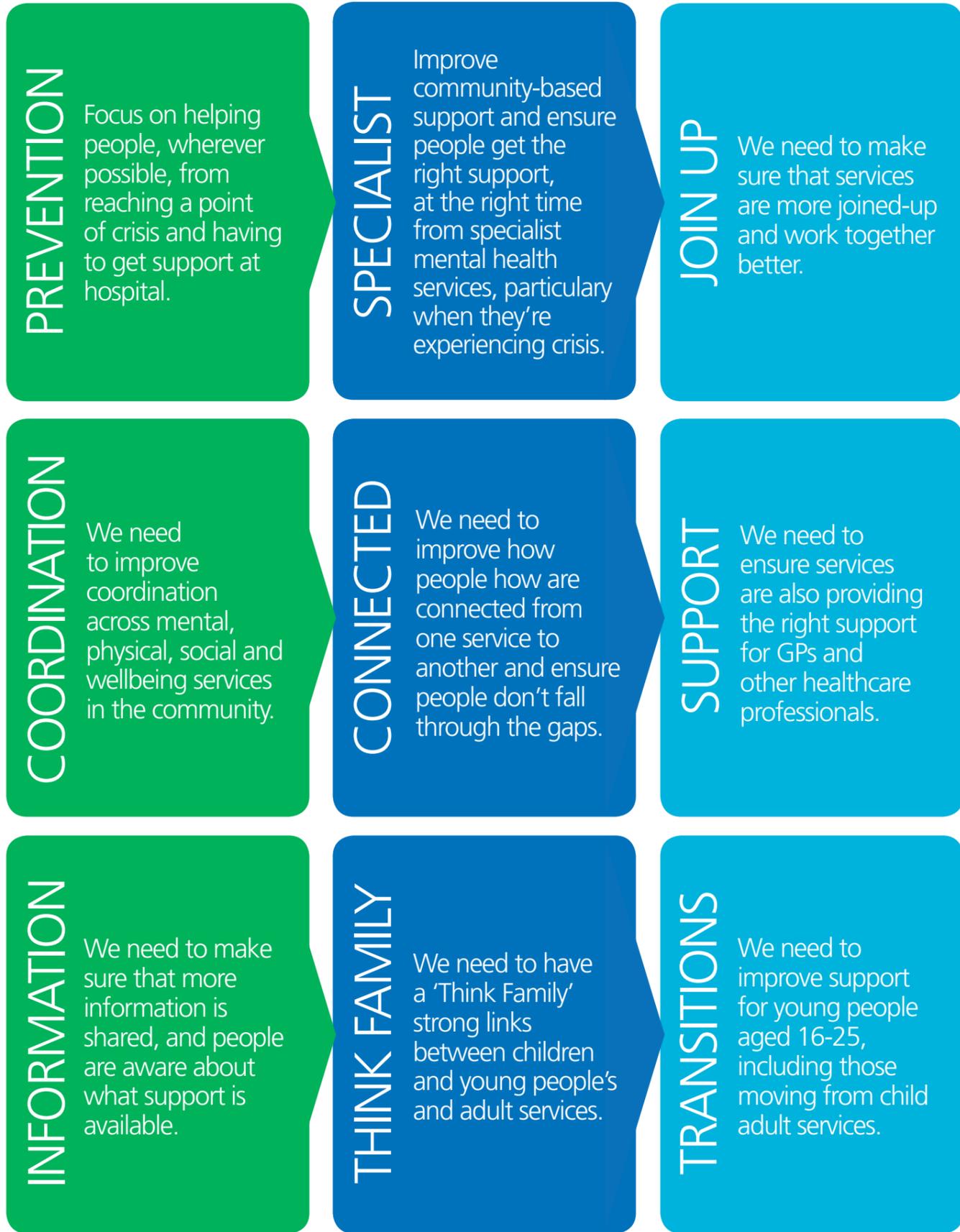


We have identified the Thrive approach as the preferred model of mental health provision in B&NES. This approach has recently been adopted to support children and young people locally and builds on a needs based, whole system approach to supporting people's mental health. The Thrive approach replaces the current 'tier' pathway or model of care with 3 'clusters' or 'groups.' These are staying well, getting help and crisis.



Thrive supports the provision of mental health services using a whole-system, population-based approach which focuses on the mental health and mental illness needs of different groups of people as well as the needs of individuals. It enables integration across health, education, social care and voluntary sector, with a central focus on delivering improved outcomes for people.

What people have told us and what we're doing about it



Some of the things we are doing in response

- We have developed a Collaborative Framework that sets out how we expect all the organisations that provide mental health services in B&NES to work together and with individuals so people receive holistic care and support. It will require providers of adult and children and young people's services to work collaboratively in the interests of children and young people at all times, in addition to ensuring safe and effective transitions between services.
- Virgin Care is developing an overarching community navigation service to ensure consistent, up-to-date information and advice is readily available in a range of community settings.
- Across BaNES an Integrated Care record is being developed. This project is being led by Virgin Care. This will mean information relating to the direct care of an individual will be shared across some providers that were previously not able to access information about an individual. This will facilitate a reduction in needing to tell their story multiple times.
- Providers of mental health services will need to consider the needs of family members who are supporting an individual with mental health issues. All commissioned service contracts will feature a requirement to embrace a 'Think Family' approach.
- A new Mental Health and Wellbeing Charter has been developed to complement the Carers Charter, and which set out how people can expect to be treated and respected by community mental health teams, and by community organisations. This Charter will be adopted by all organisations that provide mental health services and activities in B&NES.
- Bath Mind and Virgin Care are working in collaboration to develop a proposal for an evening safe space, which is open every evening throughout the year, even on bank holidays, to provide a safe space for people at the point of crisis and will support them through this crisis to prevent their issues escalating. The provision of a forward plan will be a key element of this.
- To complement the work of Breathing Space, and to help prevent people entering crisis, Virgin Care are working with Curo determine the viability of extending the availability of the Wellbeing House to 7 days a week, and to increase the skill level of the staff so they are better able to manage people with higher level needs. This is in direct response to feedback from service users, services, Commissioners and AWP.
- The CCG, the Council and Avon and Wiltshire Mental Health Partnership NHS Trust are working together to improve the physical health of people with mental illness. There are schemes under way to improve the physical health checks undertaken both on AWP wards and in primary care. Further work to build on these initial developments will be progressed via the Collaborative Framework.
- AWP has worked with Oxford Healthcare to ensure closer collaboration and earlier involvement during the transition from children's and adolescent mental health (CAMHS) to adult services, developing shared protocols and establishing a transitions panel. This has also enabled the development of common transition standards to be adopted across all mental health providers working with young people aged 16-25.
- Commissioners are building on existing collaboration with schools and universities to ensure that services are better planned and joined up, to provide improved services to young people.
- The NHS Long Term Plan makes a renewed commitment that 'mental health services will grow faster than the overall NHS budget.' This will enable further service expansion (including enhanced counselling services) and faster access to community and crisis mental health services for both adults and particularly children and young people. These plans will be formalised as part of B&NES, Swindon and Wiltshire CCGs working closer together as a sustainability and transformation partnership.