

**HEALTH SCRUTINY PANEL**

**17 DECEMBER 2013**

<p><b>MENTAL HEALTH SERVICES CAPACITY</b></p>
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**PURPOSE OF THE REPORT**

1. To provide the scrutiny panel with an outline of today's meeting.

**BACKGROUND**

2. Members will recall that at the meeting on 7 November David Brown, the Director of Operations from the Tees, Esk and Wear Valley NHS Foundation Trust (TEWV) gave an overview of current Mental Health services in order for the panel to consider the issues and determine how it was to proceed with its investigation.
3. Attached at appendix 1 is a copy of the draft terms of reference for Members to discuss and agree during the course of the meeting.
4. At the panel's last meeting, Members will recall that, currently, no information on individual outcome measures is collected so it is very difficult to assess whether the policy of service reconfiguration has delivered a better patient outcome. However the Panel did learn that fewer patients had been admitted to hospital and generally for a shorter length of stay and access to talking therapies and Crisis and Home Care Treatment had improved. The panel agreed that it would like to discuss these issues with a representative from MIND.

**Today's meeting**

5. At this meeting Emma Howitt, Chief Executive from Middlesbrough and Stockton MIND will be in attendance to explore the issues

**Areas for Discussion**

6. The following questions are not exhaustive, and it is suggested that they are used as a guide for discussion at the meeting today.
  - a) We read that in some areas mental health services are 'straining at the seams' to cope with the growing number of people with mental illnesses, has there been an increase in the numbers of people coming to MIND for help and support?

- b) Many services are under pressure due to an ageing and growing population, if there has been an increase in people seeking support has it been in any particular group?
- c) The panel have learnt that it is difficult to monitor the impact of changes in mental health policy, is there a way we can measure its success, and if there isn't what should we be measuring?
- d) What have the changes in policy meant to service users?
- e) The system could still be described as too paternalistic and medical, what can we do differently, are there any radical approaches that could yield positive results?
- f) We know that prevention is better than cure, what do mental health organisations do to try and prevent mental illness and what more can be done in this area?

## **RECOMMENDATIONS**

- 7. It is recommended that the scrutiny panel considers and approves the draft terms of reference and determine how it wishes to proceed with the investigation of this topic.

## **BACKGROUND PAPERS**

Report to Health Scrutiny Panel - 12 June 2013: 'Work Programme 2013/14.'

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**Overall Aim of the Review**

There has been an historical move away from institutional care, reducing the stay of patients and preventing people from becoming patients in the first place and a move towards keeping people well in the community. The review will consider if service reconfiguration in Mental Health Services has delivered better patient outcomes and efficiency savings, and whether this policy remains the best way forward for the challenges faced by Mental Health Services today.

**Terms of Reference**

1. To establish what Mental Health Services are provided in Middlesbrough.
2. To consider how money has been invested into community services and if there are sufficient community mental health facilities within Middlesbrough.
3. To consider whether or not reduced bed capacity has led to more pressures being placed on community based services.
4. To look at current capacity levels and the effect of out of area placements.
5. To consider if this service reconfiguration has led to improved patient outcomes and a better quality service.
6. To consider if there are any areas of improvement that could be implemented in order to ensure the best services for people in Middlesbrough.