

Individual Decision

The attached reports will be taken as
Individual Portfolio Member Decisions on:

27th August 2008

Ref:	Title	Portfolio Member	Page No.
ID1668	Commissioning Strategy for People with a Learning Disability 2008-2011	Joe Mooney	3 - 34
ID1669	Commissioning Strategy for Mental Health Services 2008-2011	Joe Mooney	35 - 61

Individual Decision

Title of Report:	Commissioning Strategy for People with a Learning Disability 2008-2011		
Report to be considered by:	Councillor Joe Mooney	on:	27th August 2008
Forward Plan Ref:	ID1668		

Purpose of Report:	To outline the contents of the Commissioning Strategy which will provide the framework for the development of services for local people with a learning disability for the next three years.
Recommended Action:	To approve the consultation draft Commissioning Strategy for people with a learning disability.
Reason for decision to be taken:	The Commissioning Strategy has been developed in partnership with NHS Berkshire West, through a process of engagement with local stakeholders. The previous strategy which ran from 2004 – 2007 has now expired and this document reflects current national and local policy.
List of other options considered:	None
Key background documentation:	Learning Disability Service Plan 2008/09 Local Services for Local People 2007 Putting People First in West Berkshire 2008

Portfolio Member:	Councillor Joe Mooney
Tel. No.:	0118 941 2649
E-mail Address:	jmooney@westberks.gov.uk

Contact Officer Details	
Name:	Bev Searle
Job Title:	Head of Community Care and WellBeing
Tel. No.:	01635 519503
E-mail Address:	bsearle@westberks.gov.uk

Supporting Information

1. Introduction

- 1.1 The Commissioning Strategy for People with a Learning Disability 2008 – 2011 follows the previous strategy which ran from 2004 – 2007.
- 1.2 It provides the overarching framework to guide the use of resources for the next three years, in line with national and local policy requirements.
- 1.3 The strategy has been developed in partnership with NHS Berkshire West and has been informed by stakeholder views regarding strategic priorities.

2. Proposals

- 2.1 The contents of the strategy includes sections outlining the policy agenda, needs assessment, patient, service user and public view, the current commissioning position, strategic commissioning priorities, financial strategy and developing the commissioning function.
- 2.2 The strategic commissioning priorities are as follows:
 - Personalisation and the development of self directed services
 - Day-time activities
 - Improving Health
 - Housing
 - Partnership Working
 - Performance Monitoring
 - Improving Commissioning
- 2.3 The financial strategy section addresses the increase in growth of demand for services, the anticipated decrease in Supporting People funding, the need to maximise opportunities to secure external funding, to continue to re-engineer services to achieve best use of resources and the future influence of the development of self directed services.
- 2.4 The continued development of the commissioning function is described in the following sections:
 - National requirements
 - Local engagement
 - Needs Assessment
 - Procurement and contracting
 - Quality and Effectiveness of Care
 - Value for Money
 - Joint Commissioning and Practice Based Commissioning
 - Implementation Plans

3. Conclusion

- 3.1 The Commissioning Strategy will provide the overarching framework to inform the effective use of resources for the provision of services for people with a learning disability over the next three years.

- 3.2 The strategy will enable the continued progress in achieving balance between cost effectiveness and the provision of quality services, promoting health and well being of local residents with a learning disability, and contributing to continuing high standards of performance.

Appendices

Appendix 1 – Commissioning Strategy for People with Learning Disabilities

Implications

Policy:	The Commissioning Strategy provides an overview of relevant national and local policies and is consistent with them – in particular Putting People First in West Berkshire is a key reference point.
Financial:	The Commissioning Strategy provides the overarching framework for the use of resources over the next three years.
Personnel:	Staff employed within the Learning Disability Service constitute a major resource for the ongoing development of services.
Legal:	None
Environmental:	None
Equalities:	Inequalities are addressed through planning and delivery of services. These are monitored through the service unit EIA action plan, and actioned through Service and Team plans.
Partnering:	West Berkshire Council and NHS Berkshire West work in partnership to commission and provide services for local people with a learning disability, and this Commissioning Strategy outlines the strategic plans for the development of these services from 2008-2011
Property:	The paper makes general reference to the continued use of the Phoenix Centre to provide a local centre for services for people with a learning disability.
Risk Management:	The Commissioning Strategy provides the framework to shape the future use of resources and therefore helps to manage the risks regarding increased growth in demand for services by ensuring the best use of resources available.
Community Safety:	None

Consultation Responses

(Consultation must be undertaken with the following Members, where appropriate, before any decision can be made by the Portfolio Member.)

Members:	
Leader of Council:	Councillor Graham Jones
Overview & Scrutiny Commission Chairman:	Councillor Brian Bedwell

Ward Members:	n/a
Opposition Spokesperson:	Councillor Owen Jeffery
Policy Development Commission Chairman:	Councillor Quentin Webb
Local Stakeholders:	Learning Disability Partnership Board (Voluntary, Statutory and other partnership bodies, service users and carers)
Officers Consulted:	Corporate Board, Housing, Cultural & Leisure
Trade Union:	N/A

CONSULTATION
DRAFT
West Berkshire
Commissioning Strategy
for
People with Learning Disabilities
2008 – 2011

Revision History

Revision Date	Version No.	Summary of Changes
May 2008	1.2	Document creation.
May 2008	1.3	First draft sent to HoS
July 2008	1.4	Further amendments made prior to Corporate Board
July 2008	1.5	Delete references to PCT and insert NHS

CONTENTS

	Page
1. FOREWORD.....	3
2. INTRODUCTION.....	5
3. POLICY AGENDA	8
4. NEEDS ASSESSMENT	10
5. PATIENT, SERVICE USER AND PUBLIC VIEW	15
6. CURRENT COMMISSIONING POSITION.....	16
8. FINANCIAL STRATEGY	23
9. DEVELOPING THE COMMISSIONING FUNCTION	26

DRAFT

1. FOREWORD

Commissioning is the process by which Local Authorities and the National Health Service (Berkshire West) purchase the services required to meet identified health and social care needs of local people.

West Berkshire Council and NHS Berkshire West work in partnership to commission and provide services for local people with a learning disability, and this Commissioning Strategy outlines the strategic plans for the development of these services from 2008-2011.

Berkshire Healthcare Foundation Trust (BHFT) is commissioned by the NHS Berkshire West to provide some of the specialist services for people with a learning disability that are described within this document, and which complement those provided by the NHS Berkshire West and the Council. West Berkshire Council works in partnership with NHS Berkshire West to provide integrated community health and social care services under a single management structure within the Community Team for People with a Learning Disability (CTPLD).

Current information about the local population and prevalence of learning disability tells us that there are approximately 515 people with a learning disability living in the West Berkshire area – this rises significantly to 3,725 if people with a mild to moderate learning disability are included within the total. People with a learning disability are likely to have poorer general health than the rest of the population, and can have difficulty in accessing appropriate services to meet their physical health needs. They are also more likely to suffer from mental health problems in addition to their learning disability. Some people have complex physical disabilities alongside their learning disability, and others may have challenging behaviour. All of these issues need to be taken into account when planning the development of services based on the individual needs of a person with a learning disability and their family.

The West Berkshire Learning Disability Commissioning Strategy has been informed by important local and national documents. Locally, the key points of reference are:

The Council's Adult Social Care Strategy, "Putting People First in West Berkshire" 2008 - 2011

NHS Berkshire West Commissioning Strategy 2008 – 2011

Local Services for Local People 2007

Preparing for the Future 2006 onwards

These documents highlight the aims and guiding principles of West Berkshire Council and NHS Berkshire West which in turn reflect the national policy agenda as well as locally defined priorities and issues. The major national policy influence for Learning Disability Service development remains the Valuing People White Paper published in 2001, and the recent paper Valuing People Now outlines key priorities which are reflected in this Commissioning Strategy.

Three key aims of this Commissioning Strategy are:

- Better health and well-being for all – which includes the reduction of health inequalities, development of work opportunities and availability of supported housing.
- Better care for all – which will be achieved by ensuring that services are of good quality, based on evidence of effectiveness and enable people to have choice and control over personalised services.
- Better Value for all – which will ensure that resources are used in an informed way, and that organisations work in partnership to achieve best value.

The West Berkshire Learning Disability Commissioning Strategy will be subject to review and formal monitoring through the Learning Disability Partnership Board (LDPB). This group includes representatives of service users, through the It's My Life Group, and also family carer representatives. It is extremely important to the success of this Commissioning Strategy that the views and experiences of services users and their families continue to shape the development of services.

A great deal of progress has been made in the development of local services in recent years – and we are extremely proud of the work that has been undertaken in partnership by service users and their families, the staff of West Berkshire Council and NHS Berkshire West, the providers of our commissioned services and by partner organisations. However – we recognise the need for continuous improvement and suggestions and comments are welcomed at any time and can be directed to:

Bev Searle
Area Director NHS Berkshire West/Head of Community Care and Well-being
Avonbank House
West St
Newbury
RG14 1BZ
Telephone: 01635 519503 Email: BSearle@westberks.gov.uk

DRAFT

2 INTRODUCTION

2.1 Aims of the commissioning strategy

The three key aims described in the foreword, better health and well-being for all, better care for all and better value for all, form the vision for the development of World Class Commissioning by the Department of Health. This vision also reflects the aims of Adult Social Care Strategy, "Putting People First" as well as the priorities outlined within Valuing People Now (2008 – 2011). The following aims bring all of these elements together as follows:

- Better health and well-being for all

People with a learning disability can frequently experience poorer physical health than the rest of the population, and some people have a significant physical disability or other complex needs alongside their learning disability. Services commissioned for people with a learning disability should address health inequalities and promote health and well-being. In addition, health services for the whole population should be as accessible as possible to people with a learning disability. Opportunities to work, to participate in leisure activities and develop and maintain relationships are integral to quality of life for everyone, and should be available to people with a learning disability, ideally within their own communities.

- Better care for all

We aim to ensure that services directly provided by West Berkshire Council, as well as those commissioned by the NHS Berkshire West and the Council will be of good quality. The personal safety of people with a learning disability will be promoted through effective understanding and implementation of safeguarding adults procedures. The Learning Disability Service and the Council's Care Quality Team will work together to ensure that services are monitored in line with Service Level Agreements or contracts. This work will be informed by external performance assessments undertaken by the Healthcare Commission and Commission for Social care Inspection.

The development of choice and control is at the centre of current health and social care policy, and this Commissioning Strategy provides a framework for its local development. Although we have been working on person centred planning, direct payments and more recently individual budgets, we still need to develop new ways of thinking about service provision and development.

- Better Value for all

We will continue to improve our use of resources, making sure that we use information about the needs of service users effectively, while improving our information systems themselves.

We will measure the value for money that we achieve locally, against national comparisons, and take action to improve this when required.

We will improve our partnership work with providers of commissioned services, the local business and voluntary sector to provide a clear long term direction for the development of services.

We also aim to develop innovative and locally appropriate approaches which increase inclusion and combat stigma.

2.2 Values and Principles Informing Future Service Provision

Putting People First in West Berkshire highlights the Council's three core values outlined in the Council Plan 2007 – 2011:

- Respect in all relationships
- Integrity in everything we do
- Ambition to deliver continuous improvement

The vision of NHS Berkshire West is:
"All as healthy as the healthiest"

The four key principles of Valuing People; Rights; Choice; Independence and Inclusion, continue to provide the threads running through the Commissioning Strategy – which aims to provide a framework through which they can be brought to life in the way we use resources. "Nothing About Us Without Us" is still at the heart of Valuing People and underlines the central importance of involvement of people with a learning disability in the planning and development of services they use.

These overarching principles and values translate into the following principles of care and delivery:

- We will give priority to people with a learning disability who are most vulnerable and have the greatest care needs
- We will offer a range of services which are designed to help people with a learning disability to live in their own home for as long as possible
- Health and Social care organisations will work in partnership with health, housing and the private and voluntary sectors to provide joint services
- We will develop services to help people with a learning disability to be as independent as possible
- We will develop services to meet the needs of black and minority ethnic people with a learning disability
- We will give priority to the need for support to those people who care for people with a learning disability

2.3 Purpose and Scope

The commissioning strategy covers a 3 year period (2008-2011), and will be reviewed annually. Updates will be issued as short documents, in newsletters and briefings for the Learning Disability Partnership Board.

The Commissioning Strategy should be seen as a working document, to guide and support future work. It aims to provide specific targets, measurable outcomes and dates for achievement, based on analysis of available information about needs and local and national policy.

2.4 Progress made against key objectives of 2004-07 Commissioning Strategy

The following are the five key objectives identified in the 2004-07 Commissioning Strategy.

- The commissioning process will effectively promote choice for users of learning disability services.
- The pattern of investment will continue to change to increase and develop community services, while decreasing the proportion of spend on residential care
- Integration of commissioning across social care, health, supporting people, and the non-profit sector will be achieved.
- The Commissioning Process will be robust and clear at all levels
- The pattern of commissioning will change to match the needs of people with learning disability and their carers more accurately, taking into account and preparing for longer term trends

While some of these will remain important in the current Strategy, specific progress has been made towards the achievement of these objectives over the last four years.

- The development of Person Centred Planning (PCP) will be taken forward, in line with the PCP Strategy. This will enable people with a learning disability to be supported in expressing aspirations, hopes and choices. A system will be developed to collect together information from PCP's to inform annual Commissioning Reviews. Person Centred Planning has progressed to some extent and several members of staff have had training but PCPs are not as widely used as we would like and this is still ongoing work
- Increasing the number of service users who access services of their choice through direct payments, currently 30 users have direct payments set up and work will continue to improve this number
- Promoting creative and flexible service provision – In 2004 a restructuring of Day Opportunities took place, and we opened the Phoenix Centre in 2007 – this is a purpose built centre providing a focus for local services. A project to review and evaluate will take place in 2008 to ensure that local day opportunities fit with national and local strategic objectives as outlined in Valuing People Now, the Learning Disability Service Plan 2008/09, and A Breath of Fresh Air (the Council's Sustainable Communities Plan)
- Improving the Information provided to service users and carers about services available
- The development and modernisation of the Community Team for People with a Learning Disability (CTPLD) has been successful in achieving improvements over the last year, and will be continued.
- The modernisation of Day Services has brought about an increased emphasis on work opportunities with 10 people accessing either supported employment or paid employment. West Berkshire Council provided services, Link Up and Pathways to Employment (P2E) are now working in partnership to provide a range of services. This has increased the social inclusion of many service users.
- There are 130 people with a learning disability who have their own tenancies.
- A review of all "Out of County" placements has taken place and much work has gone into developing and implementing the new policy of Local Services for Local People.
- Work has been done to combine funding streams e.g. Community Care, Health, Supporting People and Independent Living Fund (ILF) to maintain the opportunities for supported living in West Berkshire.
- West Berkshire Council has been active in helping to develop the Costing Model for Learning Disability residential services across the South East Region and this is now being implemented as a pan-Berkshire commissioning project by the Berkshire Procurement and Shared Services Unit. (BPSSU)
- There is now a Draft Transition Policy for all relevant services in West Berkshire Council, which outlines the specific responsibilities of partner organisations and departments, ensuring a clear process and good co-operation for young people coming into adult services.
- There is now a clear system for assessing, agreeing and collating needs information and the Learning Disability team is now fully operational on the RAISE electronic record system, bringing clarity in terms of management information and use of resources. General quality standards have been developed for all services.
- NHS Berkshire West has committed to the future provision of health checks for people with a learning disability across the whole district.
- The Learning Disability Commissioning Group has established a process for monitoring and approving spend against the 28a Budget – which meets the social care needs of people who used to reside in hospitals.
- The Preparing for the Future group has developed a process that continuously improves commissioning activity and ensures that services both meet needs and Best Value requirements in terms of cost and quality.

Performance monitoring of Learning Disability services has significantly improved over the last 3 years and managers are now regularly monitoring performance against agreed national and local targets. This has been assisted by much more robust input from the Quality and Performance team. There is now an Equalities Impact Assessment in place for Learning Disability services that addresses the needs of specific groups.

2.5 Partnership working

Partnership working is central to our approach in West Berkshire, as we believe that it secures the best outcomes for service users, through the most cost-efficient use of resources. West Berkshire Council has an integrated Community Services Directorate, enabling strong links between Housing, Culture and Leisure Services and Adult Social Care. There are a number of jointly accountable senior management posts, which help to ensure a thorough understanding of health and social care issues and promote the development of integrated approaches.

We are able to utilise a number of partnership groups to progress our work to improve services:

- The Learning Disability Partnership Board
- The Berkshire West Learning Disability Commissioning Group
- The Preparing for the Future Steering Group
- The Health and Well-being Partnership

The foundation provided by strong partnerships enables us to ensure that our commissioning is developed and implemented in an integrated way, and is enhanced and enriched by the healthy challenge resulting from the involvement of a diverse range of stakeholders.

3 POLICY AGENDA

The Commissioning Strategy has been written within a context of national and local policy and guidelines, from which the overarching themes and priorities have been taken. Key reference documents are listed below.

Commissioning Framework for Health and Wellbeing for the NHS and Local Councils Department of Health (DoH) March 2007

World Class Commissioning Competencies DoH December 2007

Putting people first: a shared vision and commitment to the transformation of adult social care DoH December 2007

Our Health Our Care Our Say DoH White Paper Jan 2006

Local Government Act 1999 with reference to Best Value

Building Capacity and Partnership in Care (BCPC)

Department of Health October 2001 Principles for good commissioning agreed by government, independent sector providers and health, housing and social care commissioners.

Getting to Grips with Commissioning for People with Learning Disabilities CSIP April 2007

Valuing People – a new strategy for learning disability for the 21st Century Government White Paper 2001

Valuing People Now, published in 2007

From progress to Transformation

Putting people first: a shared vision and commitment to the transformation of adult social care DoH December 2007

Healthcare Commission: Draft Three Year Strategic Plan: Learning Disabilities 2006-09

Count Us In: The Report of the Committee of Inquiry into Meeting the Mental Health Needs of Young People with Learning Disabilities, published by the Mental Health Foundation.

Direct Choices – What Council's need to make Direct Payments happen for people with learning disabilities (www.dh.gov.uk)

CSCI Outcomes Framework for assessment of Adult Social care 2006-07

West Berkshire Council Plan - in particular to the following outcomes:

- A Healthier Life
- Promoting Independence
- Protecting Vulnerable People
- Including Everyone

West Berkshire Council's Sustainable Community Strategy.

Of the five themes, Prosperous, Accessible, Safer, Greener and Healthy, priorities within three have particular relevance to people with Learning Disabilities.

- a. Increase the employment rate within key groups
- b. Reducing inequality in the health of local people.
- c. Ensure the vulnerable are safe.

The Preparing for the Future Programme

This includes a number of work streams aimed at understanding and planning for the increased growth in demand for services, undertaken by local Learning Disability Services in partnership with other service areas and/or partner organisations.

'Local Services for Local People'

Policy Statement for Adult Learning Disability Services May 2007 sets out the framework within which local social care service provision will be commissioned for people with a learning disability, to ensure that individuals receive quality services, which achieve outcomes identified through assessment of their needs.

WBC Fair Access to Care Services policy 2005

NHS Berkshire West Commissioning Strategy 2008 - 2011

Putting People First in West Berkshire due for completion in 2008

Joint Strategic Needs Assessment due for completion in 2008 partnership between NHS Berkshire West and West Berkshire, Reading and Wokingham Councils.

West Berkshire Supporting People Strategy due for completion in 2008

4 NEEDS ASSESSMENT

"To understand how best to plan and deliver services for the people of West Berkshire, we need to understand the area and communities we are working with, as well as external influences, which play a part in shaping our District."

West Berkshire District Profile 2008

4.1 Population data

These figures are based on 2006 mid-year estimates from the Office of National Statistics (ONS).

The total current West Berkshire population is 148,760, of this number 92,649 people are aged 18 -64, and 20694 are over 65.

Different organisations define learning disabilities in different ways and statistics about people with learning disabilities also vary. There is often no clear consensus. The figures below are taken from some of the most commonly used sources quoted on the website of the Foundation for People with Learning Disabilities.

4.1.1 How many people have a learning disability?

- About 985,000 people in England have a learning disability (about 2% of the population). 796,000 of them are aged 20 or over

Estimating Future Need/Demand for Support for Adults with Learning Disabilities in England, Institute for Health Research, Lancaster University (2004)

- There are 55,000-75,000 children with a moderate or severe learning disability in England

Learning disabilities: facts and figures, Department of Health (accessed online 2007)

- There are an estimated 210,000 people with severe and profound learning disabilities in England: around 65,000 children and young people, 120,000 adults of working age and 25,000 older people

Valuing People, Department of Health (2001)

- Only 20% of adults with learning disabilities are known to learning disability services

note to Adults with learning difficulties in England 2003/4,

National Statistics & NHS Health and Social Care Information Centre (2004)

Based on the percentage of the UK population living in West Berkshire, this would equate to 515 West Berkshire residents with severe and profound learning disabilities.

In the case of people with mild/moderate learning disabilities, lower estimates suggest a prevalence rate of around 25 per 1000 population. This would equate to approximately 3725 West Berkshire residents with a mild/moderate learning disability based on 2006 mid year population estimates. Adding these figures together it would suggest that approximately 4,240 West Berkshire residents have a learning disability.

4.1.2 Will there be more people with learning disabilities in the future?

- The number of adults with learning disabilities is predicted to increase by 11 per cent between 2001 and 2021. This would raise the number of people in England aged 15 and above with learning disabilities to over one million in 2021.

Estimating Future Need/Demand for Supports for Adults with Learning Disabilities in England, Institute for Health Research, Lancaster University (2004)

- The number of adults with learning disabilities aged over 60 is predicted to increase by 36 per cent between 2001 and 2021

Estimating Future Need/Demand for Supports for Adults with Learning Disabilities in England, Institute for Health Research, Lancaster University (2004)

This predicted increase in the number of people with a learning disability may be explained by:

- increased life expectancy, especially among people with Down's Syndrome
 - growing numbers of children and young people with complex and multiple disabilities who now survive into adulthood
 - a sharp rise in the reported numbers of school age children with autistic spectrum disorders, some of whom will have learning disabilities
 - greater prevalence among some minority ethnic populations of South Asian origin
- Valuing People, Department of Health (2001)*

An increase of 11% in the number of adults with Learning disabilities in West Berkshire would raise the numbers to 4706.

Number of people receiving services from West Berkshire Council 2005-08				
Open client base as at 31 st March of each year	2005	2006	2007	2008
Learning Disability	389	393	439	460

This table demonstrates the increase in the numbers of people with a Learning Disability receiving services from West Berkshire Council over the last four years. With the predicted increase in prevalence this trend is likely to continue.

4.2 Ethnicity

West Berkshire has a relatively small number of people from minority ethnic backgrounds, at 2.6% of the whole population (all age groups 2001 Census)

Although we do not know the ethnic background of the potential number of people with a learning disability living in West Berkshire stated above, we do have data on the ethnicity of the people currently receiving a service from West Berkshire Council: Of the 390 adults with a learning disability receiving a service as at 16th March 2008, the ethnicity breakdown is as follows:

White background = 383 (98%)

Any other background (Asian, Caribbean, Chinese, African) = 6 (1.5%)

Not stated = 1

NB: Due to the low numbers in the any other background category, these cannot be broken down to the risk of identifying individual clients.

4.3 Where do people with learning disabilities live?

4.3.1 National Statistics

- About 60% of adults with learning disabilities live with their families

Valuing People, Department of Health (2001)

- About 39,500 people with learning disabilities live in care homes and hospitals. This is about a third of all the people in touch with learning disability services. About 11,000 of these people live 'out of area', that is away from their home area.

Valuing People – what do the numbers tell us? (2005)

- Around 34,000 people with learning disabilities are getting help from support workers paid for by the Supporting People programme. Most of these people live in hostels or shared housing.

Valuing People – what do the numbers tell us? (2005)

4.3.2 West Berkshire Statistics

Number of clients aged 18-64 with a learning disability receiving residential/nursing care as at 31st March 2008

71 people in permanent residential care
 3 people in permanent nursing care
 28 people in temporary residential care
 0 people in temporary nursing care
 27 people in adult placement
 18 people receiving Adult placement respite

4.4 How many people with learning disabilities work?

4.4.1 National statistics

- 17% of people with learning disabilities who are of working age have a paid job
 - Adults with learning difficulties in England 2003/4, National Statistics & NHS Health and Social Care Information Centre (2004)

- About one in ten people with learning disabilities who are in touch with services are doing any form of paid work

Valuing People – what do the numbers tell us? (2005)

- About one in 20 people with learning disabilities have an unpaid job

- Adults with learning difficulties in England 2003/4, National Statistics & NHS Health and Social Care Information Centre (2004)

4.4.2 Current local figures update

31st March 2008 by people aged 18-64 Use of day services (work and alternatives)

83	Creative Activities
105	Supported Employment (incl paid)
80	Link Up
25	Growing for All (G4All)
25	Outreach

NOTE: Some clients will be attending more than one activity

(Descriptions of these services are provided in section 6 below.)

4.5 How does the health of people with learning disabilities compare to the health of other people?

4.5.1 Mental Health

- People with learning disabilities are 2.5 times more likely to have health problems than other people
Equal Treatment: Closing the Gap, Disability Rights Commission (2006)
- Children and young people with learning disabilities are 6 times more likely to have mental health problems than other young people

The Mental Health of Children and Adolescents with Learning Disabilities in Britain,
Institute for Health Research, Lancaster University (2007)

- It is estimated that 21.6% of people with a learning disability have dementia, compared with 5.7% of the general population, and 3% of people with a learning disability have schizophrenia, compared with 1% of the general population. –

Valuing People, Department of Health (2001)

4.5.2 Physical Health

- About one person in three with a learning disability is obese compared to one in five of the general population
Equal Treatment: Closing the Gap Interim Report, Disability Rights Commission (2005)
- Four times as many people with learning disabilities die of preventable causes as people in the general population.
Equal Treatment: Closing the Gap, Disability Rights Commission (2006)
- People with learning disabilities are 58 times more likely to die before the age of 50 than the general population and have a greater risk of dying of respiratory disease, developing coronary heart disease, and gastrointestinal cancer and stomach disorders.
Equal Treatment: Closing the Gap, Disability Rights Commission (2006)
- 22% of people with a learning disability have epilepsy compared with 1% of the general population.
- People with a learning disability are more likely to have thyroid problems, osteoporosis, and sight problems than the general population.

- 40% of people with a learning disability have hearing problems.
- 80% of adults with Down’s syndrome have unhealthy teeth and gums compared with 36.5% of adults in the general population

Although we do not currently have local data about the health needs of people with a learning disability, we can use national data to give us an indication of the likelihood of certain conditions.

4.6 Access to services in West Berkshire

West Berkshire covers over half the total geographical area of the county of Berkshire, covering scattered rural communities and its urban centre in Newbury, as well as the two smaller towns of Thatcham and Hungerford.

Against an overall picture of comparative ‘wealth’, within the DETR 2000 Indices of Deprivation statistics, ten out of the 31 wards of West Berkshire have been identified as within the 20% most deprived in the country with regard to geographical access to services. The indicators measure access to post offices, food shops, GP surgeries and primary schools

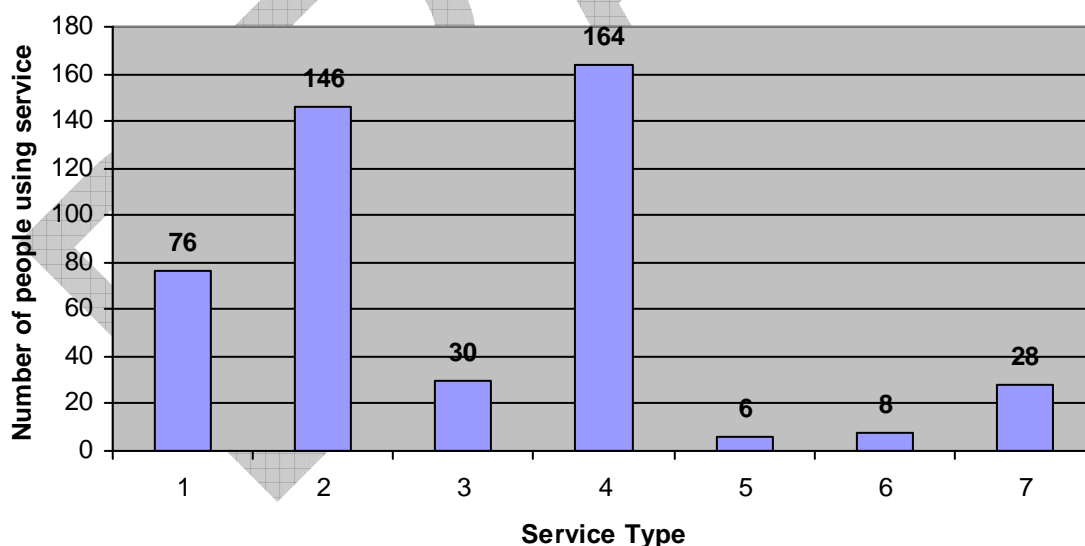
The availability of public transport is such that, without access to private transport, much of the population of West Berkshire would be effectively isolated from the services that may be available to them, but which are based in the urban centre of Newbury.

4.6.1 How many people with learning disabilities currently receive a service in West Berkshire?

As at 31st March 2008 there were 274 people with a learning disability receiving a community based service.

Community Based Services

as at 31st March 2008 by people with a learning disability aged 18-64



- 1 = homecare
- 2 = day services
- 3 = planned short breaks
- 4 = professional support
- 5 = equipment/adaptations
- 6 = other types of support
- 7 = direct payments

NB Some clients will be receiving more than one type of service.

5. PATIENT, SERVICE USER AND PUBLIC VIEW

A combination of approaches has been employed to identify the views of patients or service users and the public about the priorities for learning disability services.

5.1 NHS Berkshire West Commissioning Strategy development

The NHS undertook a significant consultation exercise to inform the development of its Commissioning Strategy, and the Health Needs Assessment which underpinned it. This commenced with an engagement exercise which was aimed at identifying the priorities for local people for inclusion in the consultation draft. The draft Commissioning Strategy was then consulted on and refined in the light of comments and suggestions made by patients, service users and the public, as well as other stakeholders.

A number of key themes emerged during this process, which are described in more detail in the final version of the NHS Berkshire West Commissioning Strategy:

- Information about services is important and could be improved
- A single point of access and integrated service delivery are important
- The importance of GP's and the need to improve access
- Equity of access is a priority – an issue for rural areas of West Berkshire
- Investment in the voluntary and community sector is important
- Skills and training for staff to enable them to provide the specialist services required, and also for patients, carers and families is needed.
- A focus on self management and prevention services is important
- Improved Out of Hours support, investment in emergency "crisis" beds, psychology, day provision and counselling accessible through self referral are all important.

5.2 West Berkshire Learning Disability Partnership Board (LDPB)

The LDPB is composed of a variety of stakeholders, including service users, family carers and representatives of partner organisations. A smaller core group is responsible for planning the agendas and monitoring progress against agreed objectives. The core group includes service user and family carer representatives, as well as commissioners and providers of services. Both groups have been consulted on the draft commissioning priorities for the West Berkshire Learning Disability Commissioning Strategy – and their previous comments informed the drafting of these priorities.

5.3 Putting People First in West Berkshire

The consultation process undertaken to develop this document has included all of the service user groups in West Berkshire, and users of learning disability services will therefore have the opportunity to influence its final draft.

5.4 Ongoing communication and engagement strategy

The Learning Disability Partnership Board will review its effectiveness in the light of Valuing People Now, and the further guidance that is expected. This will include an evaluation of the meaningful involvement of service users. The Partnership Board is the key local group which forms the focus of service user and family carer engagement, and specific events will continue to be planned by the Partnership Board to address key projects or issues – for example specific procurement exercises and Housing Options.

A specific piece of work will be undertaken to inform the review of Day Opportunities for people with a learning disability.

A review of the required development of advocacy services will be undertaken, along with the It's My Life and Speaking Up Groups.

Further work will be done to improve the links between the Learning Disability Partnership Board, the Berkshire West Learning Disability Commissioning Group and the Health and Well-being Partnership.

The Complaints and Public Information Manager will continue to provide summaries of complaints and compliments to the Learning Disability Service Management Team and the Learning Disability Partnership Board Core Group, enabling ongoing monitoring of service user satisfaction with services.

A specific piece of work will be done as part of the development of personalised services, to plan the local implementation of individual budgets.

West Berkshire Council, NHS Berkshire West and Berkshire Healthcare Foundation Trust will continue to share information gained through user satisfaction surveys, complaints and serious untoward incident reviews, to inform practice and service development.

6. CURRENT COMMISSIONING POSITION

6.1 The local market

West Berkshire shares in the overall affluence of the South East. It is home to a number of well-known national and international companies. A strong industrial base, characterised by new technology industries with a strong service sector and some manufacturing and wholesale organisations, combine to give West Berkshire one of the lowest unemployment rates in the country at less than 1%.

As stated previously, West Berkshire covers more than half the total area of Berkshire and its population is by far the most scattered of all the unitary authorities in Berkshire. While the majority of residents live in settlements west of Reading and in the major towns of Newbury, Hungerford and Thatcham, much of the district is rural. More than 60% of the area is classified as Areas of Outstanding Natural Beauty. The rural aspect of much of the district also presents many challenges. Services can be distant, public transport less viable and the supply of affordable housing cannot keep pace with demand.

West Berkshire has a smaller and more scattered ethnic minority population compared with each of the other Berkshire unitary authorities and with England as a whole.

6.1.2 The significant impact of these locality features on Community Services:

- The generally high affluence of the region and of West Berkshire can mask pockets of real deprivation and exclusion. The District does have communities with individuals and families who experience particular difficulties as a consequence of being poor within a generally wealthy region. Housing is a critical strategic concern with accommodation costs consistently among the highest in the country. This has resulted in a shortage of affordable homes for local people, including key public and private sector workers, near to where they work. Sufficient and affordable housing in rural areas is also a major concern, often resulting in young adults unable to buy or rent accommodation in areas where they grew up.
- The low numbers of people from a black and minority ethnic group makes the provision of culturally sensitive care more difficult.

- The wide geographical area of the District and the dispersed nature of much of the population makes access to services difficult and service delivery relatively expensive.
- Low unemployment makes staff recruitment problematic, particularly in services such as home care and residential care.
- West Berkshire has an ageing population. Among older people, the biggest proportional increase in West Berkshire has been in the 85+ age group which has increased by about one-third since the 1991 census, to a total of 2,301 people in the 2001 census. With a rise of 29% in this age group forecast over the next ten years, by 2011 the total West Berkshire population over 85 years of age will be nearly 3,000.
- These demographic changes will place additional pressures on Community Care and Housing services to ensure a range of supports are accessible and available where people live. For isolated rural communities this may mean additional transport links to services and the increased availability and use of broadband and other ICT technologies to provide local access to information about community care, housing and other Council services. Increased need for home adaptations or more specialised accommodation geared to allow as much independence as possible while supporting changing abilities is also likely.

6.2 Range of service provision

Services for people with a learning disability range from Day Opportunities and short breaks, to residential and nursing care; from employment opportunities and supported living to access to leisure and training opportunities.

These are offered by a number of different providers – some directly by West Berkshire Council, and some commissioned by them through Community Care or Supporting People. All of these services are subject to Best Value Reviews.

Health services commissioned by NHS Berkshire West specifically for people with a learning disability are provided by Berkshire Healthcare Trust. Generic health services for physical and mental health problems are also accessible to people with a learning disability.

6.3 Services directly provided by West Berkshire Council and NHS Berkshire West

6.3.1 Community Team for People with a Learning Disability (CTPLD)

This is a multi-disciplinary, jointly managed team provided in partnership by West Berkshire Council and NHS Berkshire West. The CTPLD team includes Social Worker/Care Managers, Community Nurses, Physiotherapist, Occupational Therapist, Clinical Psychology, and a Consultant Psychiatrist. There is access to Dietetics and Speech and Language Therapy through the NHS Berkshire West. CTPLD is based in The Phoenix Centre in Newbury and also provides services at a number of other locations through our partnerships with other organisations.

The team provides assessment and ongoing support and services for people with a learning disability and their families.

- Care Managers undertake assessments and develop care plans in partnership with service users which outline their overall package of care – this often includes a mixture of day services, supported living and short breaks.
- Nursing staff work with individuals whose needs mean that they require specialist assessment or intervention in order to meet health needs. This is addressed with Health Action Plans

- Allied Health Professionals – Physiotherapist, Dietician, Occupational Therapist and Speech and Language Therapist – provide specialist help to enable people to achieve increased independence through the use of activity, physical and language – oriented interventions.
- The Clinical Psychologist is able to provide specific assessment and interventions or advice on psychological problems of individuals or their families.
- The Consultant Psychiatrist, as a medically trained professional, is able to provide medical assessment and treatment, playing a particularly important role with people with both a learning disability and mental health problem.

The CTPLD has achieved significant improvements in terms of social care performance indicators over the last year, as well as its staff recruitment and retention record.

6.3.2 Day Opportunities

The Phoenix Centre also provides the office base for Day Opportunities consisting of the following teams:

Creative Activity Team - The CAT offers inclusion and participation through therapeutic, sensory based and creative opportunities. This is offered through a variety of activities/projects i.e. advocacy/newsletter groups, cine club film making club, creative writing, drama, art, photography, sensory, optimusic and Jabadeo. Specialists support Tai Chi, physiotherapy and reflexology

Supported Employment - The Community Work Placement Scheme offers support to enable people with learning disabilities to access voluntary and paid employment with local employers.

Clean-n-Green - This project is concerned with environmental issues. It is responsible for managing recycling activities within the Phoenix Centre along with maintaining some gardens in the local community. The project also operates a car washing facility for staff and visitors to the Phoenix Centre.

ROAR (Rangers Official Active Response) - is a community based urban and woodland regeneration group which works in conjunction with the Countryside and Environment Team and the local Ramblers Association.

Newtown Snack Bar - A fully operational snack bar offering training in all aspects of running a catering facility. Food preparation techniques, customer service skills, food hygiene, money handling, menu planning, stock control and shopping skills are just some of the aspects covered by the project

The Craft Circle - The Craft Circle designs and produces greeting cards and hand crafted gifts for sale. The project offers individuals an opportunity to learn and develop skills in painting, drawing, cutting, paper and felt making, glassware painting and needlework.

Outreach - The team is responsible for two key areas of work. The first provides short term support for young people in transition from school referred by CTPLD, and also adults in crisis requiring short term, individually tailored enhanced support. The second is providing 1:1 support for people with high levels of need. A significant proportion of this is funded by NHS Berkshire West as a community based response to Continuing Healthcare needs. On a Tuesday the Outreach Team runs activities from Greenfield House in Calcot.

6.3.3 Adult Placement and respite

The team recruits and monitors self-employed carers providing a service with three components: a supported living model, respite/short breaks and community outreach support. The service is regulated and financially supported by Social Care as well as Supporting People funding. The service continues to develop and currently provides a high level of flexibility and a wide range of services. Adult Placement provides an important option for individuals as an alternative to other models of Supported Living or Residential Care.

6.3.4 Morpheus Theatre

The Phoenix Centre has a purpose built, accessible theatre used in the provision of day services as well as for a variety of inclusive activities in the evenings and on the weekends, aimed at people with learning disabilities, but involving also people without disabilities. Currently, activities on offer include; our in-house reparatory company, Turkish 'belly' dancing, 'Ministry of Morpheus' - a night club for adults with learning disabilities, the Mencap theatre group, a youth Theatre group, and Newbury Young Film Makers.

6.3.5 Housing Services

West Berkshire Council's Housing and Performance Service works closely in partnership with the Learning Disability Service in a number of key areas:

- Housing Strategy, Enabling and Grants Team

Housing Strategy is developed in partnership with Registered Social Landlords (RSL's) Developers, Representatives of Vulnerable groups and other stakeholders to provide a framework for work on housing issues by the Council as a whole, as well as its partners. A major part of the work of this team is to secure the development of affordable housing, including supported accommodation to meet identified needs, on new housing development sites.

- Housing Operations Team

This team is responsible for the development of the Homelessness Strategy and the core functions of homeless prevention, housing advice and assistance, administering the Common Housing Register and the Choice Based Lettings system.

- Housing adaptations and renovations

Disabled Facilities Grants are available for people who need to make adaptations to their home in order to meet the needs of a family member with a disability. Renovation and Home Repair Assistance grants can assist households who are vulnerable, either through age, disability or low income, to undertake minor or major repairs to their homes. There are specific eligibility criteria for these grants, and Council staff work in partnership with Occupational Therapists, Home Improvement Agencies and Services Users in order to achieve the desired outcome. The Council is also seeking to develop a Flexible Loan scheme to assist homeowners over 60 with home improvement works.

- Supporting People Team

This team is responsible for administering the Supporting People Programme, a central government initiative that funds the delivery of housing related support for vulnerable people. The aim of the programme is to promote independent living for vulnerable people avoiding the unnecessary use of residential care. Locally, the Supporting People Programme has been pivotal in the development of supported living choices for people with a learning disability. This has been fundamental in the growing emphasis on service users rights, inclusion and independence. Specific Supporting People commissioned services are described below in section 6.7. The Supporting People Grant which funds these services is reducing year on year and effective management of this funding reduction to avoid adverse impact on vulnerable service users is one of the major challenges to be addressed through our future commissioning.

6.3.6 Support from other Housing and Performance Areas

This is provided by the following teams:

- Project Management
- Contracts
- Welfare Benefits Advice
- Vulnerable Adults co-ordination
- Accreditation & Monitoring
- Deputyship Team
- Training
- Complaints and Public Liaison Manager

6.3.7 Advocacy

West Berkshire Citizen Advocacy (Webcas) is commissioned to provide advocacy support for individuals. We have three separate Self Advocacy groups in West Berkshire who meet on different days, the Monday, Tuesday and Wednesday Groups. Representatives from these groups have a supported meeting monthly to link up the views of all groups and to feedback into the Partnership Board. Three representatives sit on the Partnership Board to ensure that they have a voice and can get involved in decision making about services which affect their lives.

The importance of advocacy in the implementation of procurement processes has been very clear, and a review of the current level of provision will be part of our commissioning development to ensure that there is adequate provision to meet local needs.

6.4 Services provided by local health services

NHS Berkshire West commissions specific services from Berkshire Healthcare Foundation Trust (BHFT) as follows:

- The Champion Unit, on the site of Prospect Park Hospital in Reading, provides an assessment function for people with a learning disability who have complex needs and who may require residential treatment and care.
- People with a learning disability and a mental health problem requiring inpatient treatment may access acute inpatient services also at Prospect Park Hospital.
- The Clinical Psychologist and Consultant Psychiatrist who work as a part of the CTPLD, are employed by Berkshire Healthcare Foundation Trust, and provide an important bridge between CTPLD and the specialist services provided by BHFT.
- People with a learning disability as well as a mental health problem may access Community Mental Health Services jointly provided by BHFT and West Berkshire Council.

People requiring very specialist inpatient services may receive an "out of area placement" if it is not possible to meet their needs within local services. These services are commissioned by NHS Berkshire West on a "spot purchase" basis in response to individual need.

Services to meet specific long term health needs may be commissioned through the use of Continuing Healthcare funding. NHS Berkshire West has recently enhanced its Continuing Healthcare Team, to include a specialist nurse assessor for people with a learning disability, to improve assessment and review processes.

6.5 Community Based Services commissioned by West Berkshire Council

6.5.1 Direct Payment Support Service

This is provided for West Berkshire Service Users by The Kingsley Organisation. The support service enables people to administer their Direct Payment to purchase the services that they choose. This includes help to set up bank accounts and payments systems, recruit and employ carers or a variety of support services. Service Users and family carers often develop innovative and creative solutions to meeting their own needs – and Direct Payments enable these to be organised in a highly personalised way.

6.5.2 Home Care provided by a range of specialist home care providers.

6.5.3 Community Meals Service supplied by Apetito

6.5.4 Equipment and adaptations

Equipment required to promote independence is supplied through the Berkshire Wide Community Equipment Service. A Home Improvement Agency is commissioned to facilitate major adaptations to people's homes which may be funded through a Disabled Facilities Grant. All equipment supplied by BCES from a joint equipment store.

6.5.5 West Berkshire Mencap

Mencap provides a significant number of services locally, and is a key partner for West Berkshire Council in the provision of Day Opportunities in particular. In addition, the long term relationships developed with service users and their families through the provision of children's services, has contributed invaluable information supporting the development of the Preparing for the Future programme.

Mencap provides the following local services, commissioned by West Berkshire Council:

- **Link Up at The Slater Centre**
Provides work based training, voluntary supported employment and some paid supported employment opportunities in a commercial packaging warehouse environment.
- **Growing4all**
This horticultural therapy project is run by West Berkshire Mencap giving service users the opportunity to grow their own flowers, fruit and vegetables within a greenhouse environment. Eventually would-be gardeners will have their own outside plot with longer term plans to sell produce commercially to generate funds to help towards running costs. The group will also have the opportunity to visit gardens, nature reserves and farms.
- **Leisure Plus**
Leisure Plus was launched in January 1997 with the aim of providing people with learning disabilities over the age of 19 the opportunity to participate in recreational and leisure activities of their choice both with their peers and through integration within the wider community. As well as offering in house run activities across a broad spectrum Leisure Plus aims to provide support for individuals who are seeking participation within community based groups for their chosen hobby/interest both by sourcing contacts and finding volunteers willing to assist its clients with their chosen activity.
- **Family Advisory Service**
This service provides support, advice and information to people with a learning disability, their families and carers and professional organisations.
The client will be supported directly by the Family Adviser. The help needed maybe for a short space of time; however many clients are supported on a longer term basis depending on their needs.
- **Bailey Thomas House**
This is owned by Mencap and maintained by **New Era Housing**. **Dimensions** will provide a short break/respite service for families and service users from April 2008.

6.6 Residential Placements

Services are commissioned from a total of 58 different service providers of residential care. Of these providers seven operate within West Berkshire, and the remaining 51 outside of the area. The majority of these are private businesses, with six being voluntary organisations with charitable status.

Nursing Care is commissioned from 2 different providers, both out of our area.

Work is continuing in partnership with BPSSU to review residential placements in order to achieve best value. All placements will be evaluated using the Costing Tool, and any action identified as a result will be carefully planned to ensure that individual needs of people with a learning disability are met through good quality and safe services.

6.7 Supporting People Services

Supporting People offers housing related support across the spectrum of intensity of need. A major procurement exercise has recently been undertaken in partnership between Supporting People and Adult Social Services, in anticipation of a number of contracts coming to an end. The following Service Providers for people with a learning disability are now funded by Supporting People:

- Creative Support
- Jephson
- Kingwood Trust
- Mencap
- Dimensions
- Purley Park Trust
- St Luke's Trust
- West Berkshire Council Adult Placement Scheme

Services provided by partner organisations

Newbury College

The college has a very close working relationship with The Phoenix Centre – which is helped by their geographical proximity. Newbury College provides specifically tailored courses for people with a learning disability, which has been a key element in the development of local Supported Living schemes. In addition, the College has provided significant support in the development of Link Up and the “It’s my Life” Advocacy Service. Newbury College also provides tutors for Growing4All at Cottismore.

Registered Social Landlords (RSL’s)

These are organisations providing social housing for rent and low cost home ownership, and have been important partners in developing supported housing of various types. The Learning Disability service has formed close links with Sovereign, A2 and Home Housing Groups that have resulted in new developments and tenancies for people with a learning disability.

7. Strategic Commissioning Priorities

The national priorities from Valuing People Now have informed the strategic commissioning priorities which are as follows:

Personalisation and the development of self directed services

- Continue to develop the use of person centred planning
- increase the number of people using direct payments year on year
- develop the model of Individual Budgets for people with a learning disability and build a cohort of people using them
- continue to develop work with family and carers in assessment of need and provision of effective support

Day-time activities

- ensure that local Day Opportunities are making best use of the Phoenix Centre for those who need a building based service and for everyone that normal community based activities are accessed wherever possible
- develop private and voluntary sector provision to ensure an effective range of local services providing day time activity

- extend employment opportunities via a partnership of local employment and work related services. Consider a social enterprise model for this
- include leisure activities and social networks as part of a holistic attempt to improve the health and well-being of people with learning disabilities

Improving Health

- extend the use of Health Action Plans
- ensure everyone who may need it, has a health check
- provide information about health and well-being options
- address health inequalities issues for people with a Learning Disability

Housing

- continue the development of local supported living options to meet the needs of local people
- extend the choice of options by developing shared equity and ISMI mortgages for people with a learning disability
- ensure that the accommodation provided in residential care for those who continue to need it is of satisfactory standard

Partnership Working

- work with other local stakeholders to develop and maintain an effective Learning Disability Partnership Board in West Berkshire
- continue implementation of guidance on effective use of resources

Performance Monitoring

- ensure that learning disability services to users and carers continuously improve by monitoring performance against specific agreed targets and indicators

Improving Commissioning

- work to the "Local Services for Local People" Policy
- use the "Preparing for the Future" Steering Group to lead on change and development
- ensure that care management practice develops to deliver self directed care via personalisation
- continue to improve our understanding of local need and forecasting of changes
- work with service providers to promote choice, quality and personalisation

8. FINANCIAL STRATEGY

8.1 Financial Resources – West Berkshire Council

The Council provides funding for directly provided services i.e. CTPLD Social Care staff, Day Opportunities and Adult Placement, as well as commissioned services i.e. some day services, residential and short break services and services for carers.

A significant amount of work has taken place as part of the Preparing for the Future Programme, to predict future costs as a result in growth in demand for services. The Council has provided additional investment to cover the increasing costs of service provision for the last three years and work is currently underway to identify the levels of future investment required.

Reorganisation of services and robust budget management has enabled achievement of savings to reinvest in additional services, and the service has been assessed as providing good value for money overall. Further work will be undertaken to assess value for money for different components of the service, ensuring best use of available resources.

8.2 Financial Resources – NHS Berkshire West

The NHS Berkshire West directly employs the majority of the health staff within the CTPLD, with the Clinical Psychologist and Consultant Psychiatrist remaining in the employ of Berkshire Healthcare Foundation Trust. The salaries and non-pay budget to cover the CTPLD health staff costs is managed by the Joint CTPLD Manager, who is accountable to both West Berkshire Council and NHS Berkshire West.

NHS Berkshire West commissions specialist mental health and learning disability services from Berkshire Healthcare Trust as part of an overall block contract as described in section 8.3 below.

The so-called Section 28a budget is held by the NHS Berkshire West to fund the social care services required by people with a learning disability who previously resided in long stay hospitals. When these hospitals closed during the 1980's, it was recognised that the people who had previously lived there would continue to need significant social care support, which would be funded by the NHS. Valuing People Now has signalled the intended transfer of these funds to Local Authorities from 2010-2011, and further guidance is expected this year.

The NHS also provides continuing care funding for health needs of people with a learning disability. There is no specific budget allocation for continuing care, but the NHS Berkshire West have an obligation to fund continuing care services to meet health needs in accordance with Thames Valley wide eligibility criteria.

As identified in section 6.4 Out of Area Placements are commissioned by the NHS Berkshire West when it is not possible to meet specialised health need within locally commissioned services.

The NHS has seen increasing spend in both Continuing Healthcare and Out of Area Placements in recent years.

Forensic Services are commissioned by the NHS for people with a learning disability who require support within the framework of the criminal justice system. The development of arrangements for this and other aspects of Specialist Commissioning has been undertaken on a Strategic Health Authority –wide basis, due to the small numbers of people in any one areas requiring specialist services, and the expertise required to commission them. These arrangements enable the NHS to share the financial risks resulting from the very high costs of these services, the need for which is extremely difficult to predict.

8.3 Financial Resources – Berkshire Healthcare Trust

Berkshire Healthcare Trust (BHT) is commissioned by NHS Berkshire West to provide specialist learning disability services, and it also provides mental health services which may be accessed by people with a mental health problems as well as a learning disability. These services, described in section 6.4 are commissioned through a block contract, with an overarching Service Level Agreement, monitored by the NHS Berkshire West Commissioning Manager with responsibility for Learning Disability Services.

8.4 Learning Disability Development Fund (LDDF)

Local Authorities are able to access central government funding to support the implementation of the Valuing People White Paper. LDDF includes both revenue and capital funding, and the Learning Disability

Partnership Board oversees a bidding and monitoring process for the use of this in line with local strategic priorities.

8.5 Supporting People

The Supporting People Programme is a national initiative designed to provide housing related support enabling vulnerable people to live as independently as possible in a variety of settings. The Supporting People Programme has been pivotal in the development of supported living for people with a learning disability and the Council is committed to sustaining services that promote independence avoiding the use of residential care.

The Supporting People (SP) spend on services for people with a Learning Disability in 2007/8 was just over £2.2m, which is 41% of the total budget. A plan to deal with the retraction (funding of ineligible tasks) identified in the first round of reviews has been agreed and actions are in place to ensure that services are sustained without quality being compromised.

The Supporting People Programme is facing a number of challenges over the next 3 years. These include a 15% reduction in SP budget between 2008/11, inclusion in the area based grant and the need to develop models of service that enable it to be used in the delivery of self-directed support. Given the pace and range of change required a new 5 year strategy is being developed for publication in 2008.

8.6 Future financial resources and key funding messages

- Supporting People funding will again be reduced over the next few years. At present, a 15% reduction in funding is being signalled for the financial years 2008/11. A new five year strategy is being developed for publication in 2008, this will establish the framework by which the reductions are managed as well as setting out the future model of service provision.
- The continued growth in demand for services for people with a learning disability is a national phenomenon and further work is required to continue to improve our forecasting of anticipated costs.
- Work will be undertaken to ensure all those people who are entitled to Independent Living Fund monies, will be able to utilise it to fund services to meet their individual needs.
- Opportunities to secure external sources of funding, where possible in partnership with voluntary sector service providers will be fully exploited.
- Further re-engineering of services will be undertaken over the next three years, to ensure that available resources are used effectively to meet individual needs. This will mean reorganisation of budgets, and changes in patterns of funding in line with strategic objectives.
- The increased use of Direct Payments will influence the type of services funded, as individual service users are supported in exercising choice about the care they receive.
- The use of Individual Budgets will be developed in Learning Disability services and will also influence the type of services provided.

9. DEVELOPING THE COMMISSIONING FUNCTION

9.1 National requirements

Putting People First requires Social Care organisations and their partners to achieve "significant change" by 2011 in services commissioned or directly provided. The Department of Health requires the NHS to achieve specific competencies to become "World Class Commissioners". West Berkshire Council and NHS Berkshire West will therefore be working together to improve the commissioning process itself, building on the progress achieved since the publication of the previous Learning Disability Commissioning Strategy.

9.2 Local engagement

This strategy has been informed by the views of service users and their families as well as other stakeholders. We need to continue to develop our engagement with service users and the public, and strengthen the links between our local Learning Disability Partnership Board, the Berkshire West Learning Disability Commissioning Group and the Preparing for the Future Steering Group.

9.3 Needs Assessment

We recognise the need to continue to improve our understanding of the needs of people with a learning disability through improved information systems which capture issues identified through assessment and care planning. In addition, it is our aim to undertake a learning disability specific Joint Strategic Needs Assessment to further inform our strategic planning.

9.4 Procurement and contracting

We will use robust procurement processes and aim to balance the need for value for money and long term planning, with the requirement for increased individual choice and control and development of personalised services. Our contracts will be clear, and contain our requirements for service quality and activity. We will continue to build on the policy direction set out in Local Services for Local People, in the development of Supported Living services within the West Berkshire area.

9.5 Quality and Effectiveness of Care

We will make use of external monitoring undertaken by the Healthcare Commission and Commissioning for Social Care Inspection (CSCI), alongside local information provided by service users and stakeholders to monitor the performance of directly provided and commissioned services. Safeguarding will be given a high priority, and we will undertake a review of services in the light of CSCI Inspections standards to ensure that we safeguarding principles are embedded within our commissioning function.

9.6 Value for Money

We will ensure that we make the best use of resources by assessing the cost effectiveness of local services against national average performance, and making improvements where required. We will continue to commission services using best value principles in line with the statutory duty of Local Authorities.

9.7 Joint Commissioning and Practice Based Commissioning

We have stated our aim to develop our joint commissioning work to ensure good use of resources and integration of services. The local Health and Well-being Strategy review planned for 2009 will include actions to promote the health and well-being of people with a learning disability. We aim to work with Practice Based Commissioners to develop innovative local approaches, and to integrate this with our joint commissioning plans.

9.8 Implementation Plans

The aims and priorities of the West Berkshire Learning Disability Commissioning Strategy will be implemented through the local Service Plan process. This ensures the production of an annual Service Plan which is monitored within West Berkshire Council, and includes both health and social care targets as appropriate for an integrated service. In addition, the Learning Disability Partnership Board will review progress in achievement of the strategy, which will in turn be reported to the Berkshire West Local Implementation Team.

DRAFT

Individual Decision

Title of Report:	Commissioning Strategy for Mental Health Services 2008-2011		
Report to be considered by:	Councillor Joe Mooney	on:	27th August 2008
Forward Plan Ref:	ID1669		

Purpose of Report: To outline the contents of the Commissioning Strategy which will provide the framework for the development of services for local people with mental health problems for the next three years.

Recommended Action: To approve the Consultation draft Commissioning Strategy for Mental Health services.

Reason for decision to be taken: The Commissioning Strategy has been developed in partnership with NHS Berkshire West through a process of engagement with local stakeholders. The previous strategy which ran from 2004 – 2007 has now expired and this document reflects current national and local policy.

List of other options considered: The Commissioning Strategy is a required document to fulfil the purposes and priorities described above. The content of the strategy is based on existing national and local priorities.

Key background documentation: Mental Health Service Plan 2008/09
Putting People First in West Berkshire 2008

Portfolio Member:	Councillor Joe Mooney
Tel. No.:	0118 941 2649
E-mail Address:	jmooney@westberks.gov.uk

Contact Officer Details

Name:	Bev Searle
Job Title:	Head of Community Care and WellBeing
Tel. No.:	01635 519503
E-mail Address:	bsearle@westberks.gov.uk

Supporting Information

1. Introduction

- 1.1 The Commissioning Strategy for Mental Health 2008 – 2011 follows the previous strategy which ran from 2004 – 2007.
- 1.2 It provides the overarching framework to guide the use of resources for the next three years, in line with national and local policy requirements.
- 1.3 The strategy has been developed in partnership with NHS Berkshire West and has been informed by stakeholder views regarding strategic priorities.

2. Proposals

- 2.1 The contents of the strategy includes sections outlining the policy agenda, needs assessment, patient, service user and public view, the current commissioning position, strategic commissioning priorities, financial strategy and developing the commissioning function
- 2.2 The strategic commissioning priorities are as follows:
 - Personalisation and the development of self directed services
 - Day-time activities
 - Improving Health
 - Housing
 - Partnership Working
 - Performance Monitoring
 - Improving Commissioning
- 2.3 The key messages in the financial strategy section address the continued growth in prevalence of mental health problems, the potential influence of joint commissioning, implications of mental health legislation, use of community resources to prevent admission to hospital, the anticipated reduction in Supporting People funding, the continued growth in demand for services, the need to secure and make effective use of external funding, continue to re-engineer services to make best use of resources and the influence of the development of self directed services.
- 2.4 The key elements identified to further develop our commissioning function are:
 - National policy requirements
 - Local engagement
 - Needs Assessment
 - Procurement and contracting
 - Quality and Effectiveness of Care
 - Value for Money
 - Joint Commissioning and Practice Based Commissioning
 - Implementation Plans

3. Conclusion

- 3.1 The commissioning strategy is required to provide the overarching direction to enable the effective management of resources in the light of significant funding challenges and the requirement to develop more choice and control for the people who use our services.
- 3.2 The strategy aims to provide that framework, enabling continued progress in the development of our commissioning function and continued high standards of performance.

Appendices

Appendix 1 – Commissioning Strategy for Mental Health services 2008-2011

Implications *(Please note that the asterisked areas need to be completed in full)*

Policy:	The Commissioning Strategy provides an overview of relevant national and local policies and is consistent with them – in particular Putting People First in West Berkshire is a key reference point
Financial:	The Commissioning Strategy provides the overarching framework for the use of resources over the next three years.
Personnel:	Staff employed within the mental health service constitute a major resource for the ongoing development of services.
Legal:	None
Environmental:	None
Equalities:	Inequalities are addressed through planning and delivery of services. These are monitored through the service unit's EIA Action Plan, Service and Team plans.
Partnering:	West Berkshire Council and NHS Berkshire West work together as commissioning partners to develop and improve local services, and this Commissioning Strategy outlines the strategic plans for the development of services for people with mental health problems in West Berkshire from 2008 -2011.
Property:	None
Risk Management:	The Commissioning Strategy provides the framework to shape the future use of resources and therefore helps to manage the risks regarding increased growth in demand for services by ensuring the best use of resources available.
Community Safety:	None

Consultation Responses

(Consultation must be undertaken with the following Members, where appropriate, before any decision can be made by the Portfolio Member.)

Members:

Leader of Council: Councillor Graham Jones

**Overview & Scrutiny
Commission Chairman:** Councillor Brian Bedwell

Ward Members: n/a

**Opposition
Spokesperson:** Councillor Owen Jeffery

**Policy Development
Commission Chairman:** Councillor Quentin Webb

Local Stakeholders: Mental Health Focus Group (Voluntary, Statutory and other partnership bodies, service users and carers)

Officers Consulted: Corporate Board, Housing, Cultural & Leisure

Trade Union: N/A

**CONSULTATION
DRAFT**

West Berkshire

**Commissioning Strategy
For
Mental Health**

2008 - 2011

Contents

	Page
1. FOREWORD.....	3
2. INTRODUCTION.....	4
3. NATIONAL AND LOCAL POLICY	6
4. NEEDS ASSESSMENT	7
5. PATIENT, SERVICE USER AND PUBLIC VIEWS.....	13
6. CURRENT COMMISSIONING POSITION.....	14
7. STRATEGIC COMMISSIONING PRIORITIES.....	19
8. FINANCIAL RESOURCES	20
9. DEVELOPING THE COMMISSIONING FUNCTION	22

DRAFT

1. FOREWORD

Commissioning is the process by which Local Authorities and the National Health Service (NHS) purchase the services required to meet identified health and social care needs of local people.

West Berkshire Council and NHS Berkshire West work together as commissioning partners to develop and improve local services, and this Commissioning Strategy outlines the strategic plans for the development of services for people with mental health problems in West Berkshire from 2008 -2011.

Berkshire Healthcare Foundation Trust (BHFT) is commissioned by NHS Berkshire West to provide health services locally for people with mental health problems. West Berkshire Council works in partnership with BHFT to provide integrated community mental health and social care services under a single management structure.

Current information about the local population and about the prevalence of mental health problems tells us that there is likely to be approximately 23,335 adults with a mental health problem living in West Berkshire at any one time. This figure covers the full range of problems – from mild to moderate depression or anxiety to severe and enduring illnesses such as schizophrenia or bi-polar illness. It also takes into account the fact that people with physical illness or disability or a learning disability may suffer from mental health problems also, resulting in a so-called “dual diagnosis”.

Mental health problems can have an enormous, and sometimes hidden impact on individuals and their families, as well as on communities. There is still a stigma attached to mental illness which can result in a reluctance to seek help, as well as social exclusion and poor general health and well-being. This Commissioning Strategy aims to address these issues by focussing on health and social care provision as well as partnership work being developed with the business and voluntary sector.

The West Berkshire Mental Health Commissioning Strategy has been informed by important local and national documents. Locally, the two key points of reference are:

The Council's Adult Social Care Strategy, “Putting People First in West Berkshire” 2008 - 2011
NHS Berkshire West Commissioning Strategy 2008 – 2011

Both of these documents highlight the aims and guiding principles of the two organisations which reflect the national policy agenda as well as locally defined priorities and issues.

Three key aims of this Commissioning Strategy are:

- Better health and well-being for all – which includes the reduction of health inequalities, development of work opportunities and availability of supported housing.
- Better care for all – which will be achieved by ensuring that services are of good quality, based on evidence of effectiveness and enable people to have choice and control over personalised services.
- Better Value for all – which will ensure that resources are used in an informed way, and that organisations work in partnership to achieve best value.

The West Berkshire Mental Health Commissioning Strategy will be subject to review and formal monitoring through the Mental Health Focus Group and Berkshire West Local Implementation Team. This will help ensure that the views and experiences of services users and their families continue to shape the development of services. Although we are proud of our local services, we recognise the need for continuous improvement and suggestions and comments are welcomed at any time and can be directed to:

Bev Searle

Area Director NHS Berkshire West/Head of Community Care and Well-being.
Avonbank House, West St, Newbury RG14 1BZ
Telephone: 01635 519503 BSearle@westberks.gov.uk

2 INTRODUCTION

2.1 Aims of the commissioning strategy

The three key aims described in the foreword, better health and well-being for all, better care for all and better value for all, form the vision for the development of World Class Commissioning by the Department of Health. This vision also reflects the aims of Adult Social Care Strategy, "Putting People First" as well as important principles of adult mental health policy. The following aims bring these three key elements together as follows:

- Better health and well-being for all

People with mental health problems can frequently experience poorer physical health than the rest of the population, and physical illness and disability can be associated with mental health problems. Services commissioned for people with mental health problems should address health inequalities and promote health and well-being; opportunities to work, participate in leisure activities and develop and maintain relationships are integral to quality of life and recovery from mental health problems. In addition, inadequate housing can compound mental illness, while good quality supported housing can be instrumental in the recovery of people with longer term mental health problems.

- Better care for all

Services directly provided by West Berkshire Council, as well as those commissioned by the NHS and the Council will be of good quality. The safety of people with mental health problems will be promoted through effective understanding and implementation of safeguarding adults procedures. This will be achieved by monitoring performance locally, having established robust Service Level Agreements and making use of external performance assessment undertaken by the Healthcare Commission and Commission for Social care Inspection. This work will be undertaken in partnership between the local Mental Health Services, in partnership with the Care Quality Team within West Berkshire Council, and the NHS Commissioning Directorate.

Guidance published by the National Institute of Clinical Effectiveness will inform the development of treatment provided for specific conditions.

The development of choice and control is at the centre of health and social care policy, and this Mental Health Commissioning Strategy provides a framework for its implementation locally. Innovative approaches and new ways of thinking about service provision – informed by the views of service users and their families will be crucial to our success in the development of personalised services.

- Better Value for all

Resources will be used in an informed way, effectively using information about the needs of service users, while improving our information systems themselves.

We will monitor our use of resources in a robust way, ensuring that local services represent value for money when measured against national comparisons.

We will work in partnership with providers, providing a clear long term direction for the development of services.

Working closely with the local business and voluntary sector, we will aim to develop innovative and locally appropriate approaches which increase inclusion and combat stigma.

2.2 Values and Principles That Inform Future Service Provision

Putting People First in West Berkshire highlights the Council's three core values outlined in the Council Plan 2007 – 2011:

Respect in all relationships
Integrity in everything we do
Ambition to deliver continuous improvement

The vision of NHS Berkshire West is:
"All as healthy as the healthiest"

The Mental Health Commissioning Strategy is based on the following principles of care and delivery:

1. We will give priority to people with mental health problems who are most vulnerable and have the greatest care needs
2. We will offer a range of services which are designed to help people with mental health problems to live in their own home for as long as possible
3. Social care and health partners will work together with housing and the private and voluntary sectors to provide joint services
4. We will develop services to help people with mental health problems to be as independent as possible and foster choice and control over their own lives, while promoting the safety and well-being of individuals.
5. We will develop services to meet the needs of black and minority ethnic people with mental health problems
6. We will give priority to the need for support to those people who care for people with mental health problems

2.3 Purpose and Scope

The commissioning strategy covers a 3 year period (2008-2011), and will be reviewed annually. Updates will be issued as short documents, in newsletters and briefings for the Mental Health Focus Group. The Commissioning Strategy should be seen as a working document, to guide and support future work. It aims to provide specific targets, measurable outcomes and dates for achievement, based on analysis of available information about needs and local and national policy.

2.4 Progress made against key objectives of 2004-07 Commissioning Strategy

The following are the five key objectives identified in the 2004-07 Commissioning Strategy.

- The commissioning process will effectively promote choice for users of mental health services
- The pattern of investment will continue to facilitate development of services in accordance with National Service Framework (NSF) Policy Implementation Guidance and local need
- Integration of commissioning across social care, health, supporting people, and the non-profit sector will be achieved
- The Commissioning Process will be robust and clear at all levels
- The pattern of commissioning will change to match the needs of people with mental health problems and their families more accurately, taking into account and preparing for longer term trends.

While some of these will remain important within this current Strategy, specific progress has been made towards the achievement of these objectives over the last four years:

The number of people accessing services of their choice through direct payments has increased significantly, enabling us to achieve our specific performance targets. We have also developed an information pack which is provided to all new service users, and reviewed and improved the information that is available to service users at Hillcroft House. We have reviewed the results of the Healthcare Commission Patient Survey, and taken action to ensure that service users are clear about the Care programme Approach locally.

We have continued to achieve a high level of performance against NSF targets as monitored by the Strategic Health Authority.

We have established a new, purpose built Supported Housing scheme in partnership with our local Supporting People Team.

The local Pathways to Employment scheme has achieved significant success in supporting people with mental health problems into paid employment.

Additional investment has enabled the recruitment of Community Development Workers for people from black and minority ethnic communities and Graduate Mental Workers.

The inspection of local Mental Health services by the Commission for Social Care Inspection (CSCI) in 2005 resulted in a judgement of "serving most people well with excellent prospects for improvement", which contributed directly to the achievement of a three star rating for adult social care services for 2005, 2006 and 2007.

We have contributed to the development of the overall Commissioning Strategy, including the Health Needs Assessment of NHS Berkshire West.

We have reconfigured some of our services to reflect the National Health Service's organisational structure, resulting in improved integration.

We have significantly increased both the numbers of carers assessments undertaken, and the number of services provided resulting from that assessment, meeting all of our targets in this area.

We are in the process of implementing a new Electronic Social Care Record system, which we aim to integrate with health information systems, thereby streamlining our recording and improving our understanding of service use and needs.

3 NATIONAL AND LOCAL POLICY

This Commissioning Strategy has been written within a context of national and local government policy and guidelines, the strategic priorities of local social care and health organisations, as well as an understanding of local need and views of service users and carers. From these the overarching themes and priorities have been developed. Key reference documents are listed below.

Commissioning Framework for Health and Wellbeing for the NHS and Local Councils Department of Health (DoH) March 2007

World Class Commissioning Competencies DoH December 2007

Putting people first: a shared vision and commitment to the transformation of adult social care DoH December 2007

Our Health Our Care Our Say DoH White Paper Jan 2006

CSCI Outcomes Framework for assessment of Adult Social care 2006 07

Mental Capacity Act 2005 and Mental Health Bill 2006

From segregation to inclusion: Commissioning guidance on day services for people with mental health problems DoH Feb 2006

Vocational services for people with severe mental health problems: Commissioning guidance DoH Feb 2006

National Institute for Clinical Excellence guidance documents:

Schizophrenia
 Post Traumatic Stress Disorder
 Obsessive Compulsive Disorder
 Bi polar Illness
 Depression and Anxiety
 Depression
 Anxiety
 Self Harm
 Eating Disorders

West Berkshire Sustainable Community Strategy. 2007 - 2026

Of the five themes, Prosperous, Accessible, Safer, Greener and Healthy, priorities within three have particular relevance to people with mental health problems.

- a. increase the provision of affordable housing
- b. Increase the employment rate within key groups
- c. Increase employment within the rural area
- d. Improve access to employment, education, health care, retail and leisure opportunities.
- e. Improve and promote opportunities for healthy and safe travel.
- f. Reduce inequality in the health of local people.
- g. Ensure more young people are enjoying life and achieving more.
- h. Increase the number of older people who live independently.
- i. Increasing the number of people who undertake voluntary work.
- j. Ensure the vulnerable are safe.

NHS Berkshire West Commissioning Strategy 2008 - 2011

Putting People First in West Berkshire due for completion in 2008

Joint Strategic Needs Analysis due for completion in 2008 in partnership between NHS Berkshire West and West Berkshire, Reading and Wokingham Councils.

West Berkshire Supporting People Strategy due for completion in 2008

4 NEEDS ASSESSMENT

"To understand how best to plan and deliver services for the people of West Berkshire, we need to understand the area and communities we are working with, as well as external influences, which play a part in shaping our District."

West Berkshire District Profile 2008

4.1 Population data

These figures are based on 2006 mid-year estimates from the Office of National Statistics (ONS).

The total current West Berkshire population is 148,760, of this number 92,649 people are aged 18 -64, and 20694 are over 65.

4.1.1 How many people in West Berkshire have a Mental Health Problem?

Estimates of the prevalence of mental distress in Britain vary. The Office for National Statistics or ONS puts the figure at one in six adults at any one time. Another major survey that is frequently quoted puts the figure at one in four. The one in six figure given by the ONS represents those people defined as having 'significant' mental health problems, whilst the latter survey uses a wider definition of mental health problems. This also includes a breakdown of the progress that these one in four people are likely to make through the mental health system as follows:

Around 300 people out of 1,000 will experience mental health problems every year in Britain
 230 of these will visit a GP
 102 of these will be diagnosed as having a mental health problem
 24 of these will be referred to a specialist psychiatric service
 6 will become inpatients in psychiatric hospitals.
 (Source: based on figures from Goldberg, D. & Huxley, P, 1992, Common mental disorders a bio-social model, Routledge.)

Based on 2006 mid-year estimates the one in four figure would suggest that 28,335 West Berkshire adults aged 18 and over have a mental health problem at any one time, ranging from mixed anxiety and depression through to schizophrenia and obsessive compulsive disorder (OCD). Of these 23,162 would be aged 18 to 64.

4.1.2 Prevalence of specific mental health problems

The following table estimates the number of West Berkshire residents having a particular mental health problem at any one time based on 2006 mid-year population estimates and figures taken from Office of National Statistics (ONS) 2000 Psychiatric morbidity among adults.

Mental Health Problem	Prevalence rate	Equivalent West Berks residents (18+) 2006
Anxiety	4.7%	5,327
Depression	10%	11,334
More Severe clinical depression	5%	5,667
Phobias	1.9%	2,153
OCD	1.2%	1,360
Schizophrenia	0.3%	340

Manic depressive illness has a lifetime prevalence rate of 1%, meaning that 1,487 West Berkshire residents will experience this at some point in their life.

The numbers of deaths due to suicide in West Berkshire are relatively low, as referenced by NHS Berkshire West Commissioning Strategy 2008 – 2011.

	2000	2001	2002	2003	2004
West Berkshire					
DSR	8.2	5.9	6.24	7.16	8.49
OBS	13	8	9	10	13
England and Wales					
DSR	9.4	8.9	8.69	8.67	8.7
OBS	5347	4875	4755	4785	4848

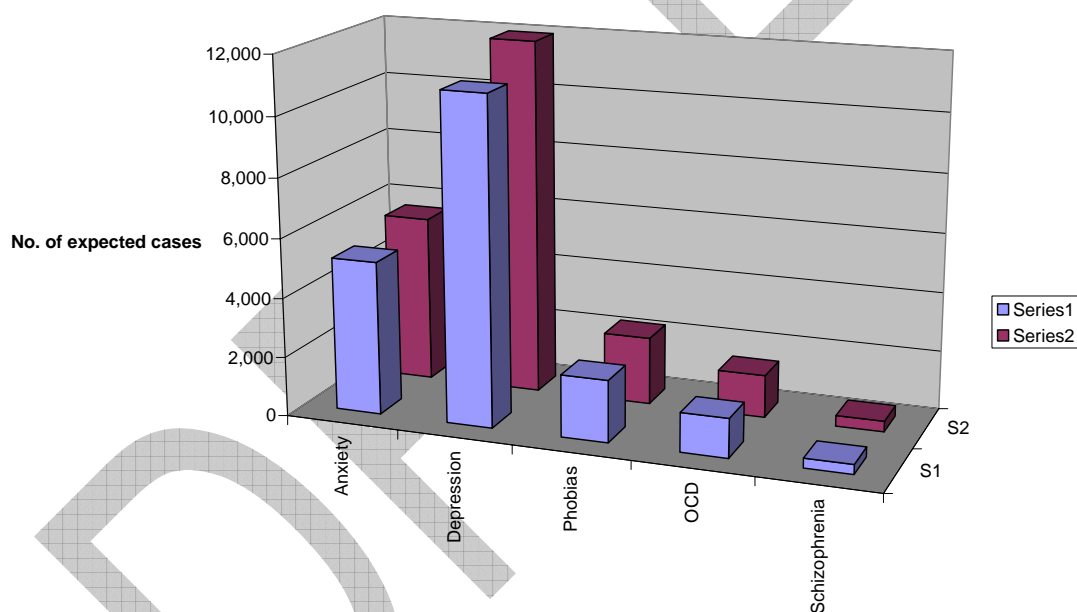
DSR – Directly standardised mortality rate per 100,000

OBS - No of deaths

4.1.3 Will there be more people with mental health problems in the future?

The World Health Organisation has highlighted the rising global incidence of mental ill health.

The chart below shows the increasing numbers of expected cases of various types of mental health problem. The figures in the front column (series 1) are for 2001, The figures in the far column (series 2) are for 2010, assuming no change in prevalence rates. Actual figures are provided in the table below for 2010.



4.1.4 How many of those with mental health problems in West Berkshire receive a service?

At 31st March 2008, 431 people with a mental health problem were receiving a service.

4.1.5 Access to services

West Berkshire covers over half the total geographical area of the county of Berkshire, covering scattered rural communities and its urban centre in Newbury, as well as the two smaller towns of Thatcham and Hungerford. There is an inconsistent picture of relative wealth and deprivation across the district and it must be noted that within the overall population profile, people with mental health difficulties consistently have higher levels of income and employment deprivation.

Crucially, with reference to access to services, against an overall picture of comparative 'wealth', within the DETR 2000 Indices of Deprivation statistics, ten out of the 31 wards of West Berkshire have been identified as within the 20% most deprived in the country with regard to geographical access to services. The indicators measure access to post office, food shops, GP surgeries and primary schools. This does not cover access to specialist services such as mental health services, where the lack of access is equivalent, if not worse. The availability of public transport is such that, without access to private transport, much of the population of West Berkshire would be effectively isolated from the services that may be available to them, but which are based in the urban centre of Newbury.

4.2 Ethnicity

West Berkshire has a relatively small number of people from minority ethnic backgrounds, at 2.6% of the whole population (all age groups 2001 Census)

However, there is evidence of a growth in numbers of people from the enlargement of the European Union in 2004, moving into the area (although these numbers are small in West Berkshire in comparison to Reading or other urban areas)

Although we do not know the ethnic background of the people living in West Berkshire who potentially have a mental health problem, we do have data on the ethnicity of those people currently receiving a service from West Berkshire Council:

Of the 431 people with a mental health problem receiving a service from West Berkshire Council as at 31st March 2008, the ethnicity breakdown by number and percentage of people receiving services is as follows:

White Background = 389 (90%)

Any other background (Asian, Caribbean, Chinese, African) = 13 (3%)

Not Stated = 29 (7%)

NB: Due to the low numbers in the any other background category, these can't be broken down to the risk of identifying individual clients

4.3 Where do people with mental health problems live?

4.3.1 National Statistics

Figures in the table below are taken from ONS, 2000, Psychiatric morbidity among adults living in private households.

Characteristics of adults with psychiatric disorders – by housing type

Housing type	All figures are percentages					
	Female		Male		All	
	with disorder	a no disorder	with disorder	a no disorder	with disorder	a no disorder
Owned outright	17	26	13	25	15	25
Owned with mortgage	45	49	50	50	47	49
Rented from local authority or housing association	26	17	26	14	26	15
Rented from other source	12	9	12	10	12	10

This table shows that compared with no disorder, those with a psychiatric disorder are more likely to rent their home from a local authority or housing association (26% compared to 15%). They are less likely to own their home outright (15% compared to 25%).

4.3.2 Current local figures

Information about housing for people with mental health problems is not currently available – however – there is a relatively low number of people in permanent residential care; at 31st March 2008, the number of people aged 18-64 was 13.

4.4 How many people with mental health problems work?

4.4.1 National statistics

All figures on this page are taken from ONS, 2000, Psychiatric morbidity among adults living in private households.

Characteristics of adults with psychiatric disorders – by employment status						
					All figures are percentages	
Employment status	Female		Male		All	
	with a disorder	no disorder	with a disorder	no disorder	with a disorder	no disorder
Employed	55	62	61	75	58	69
Unemployed	3	2	4	4	4	3
Economically inactive	41	36	35	21	39	28

This table shows that compared with no disorder, those with a psychiatric disorder are more likely to be economically inactive (39% compared to 28%). They are less likely to be employed (58% compared to 69%).

While it is important to note that the majority of people with psychiatric disorders are employed, People with mental health problems have the highest rate of unemployment amongst people with disabilities. Only around 13% of people with mental health problems are in employment, compared with around 33% of people with other long-term health problems. (Sly, F. Duxberry R. and Tillsley, C (1995) Disability in the Labour Market: Findings from the Labour Force Survey)

Local figures are currently unavailable; however data will start being collected from 2008. Figures on the employment status of people with mental health problems will be required for a new national indicator from 2008.

4.5 How does the wider health of people with mental health problems compare to that of other people?

4.5.1 Physical Health

There is a huge amount of evidence showing inequalities in health amongst people with long term mental health problems. "Closing the Gap": Disability Rights Commission Investigation and Report on Health Inequalities.

This evidence shows that this group of people have more physical illness and higher mortality rates (i.e. die earlier) than the overall population - not always for reasons related to their mental health.

People with mental health problems may be at increased risk of physical health problems for a number of reasons; some mental health problems mean that people have reduced motivation to look after themselves in terms of diet and exercise, or lack opportunities to do this. In addition, some treatments require careful monitoring and may pose risks if this is not undertaken.

People who experience mental distress are twice as likely to smoke than the general public, with 50 per cent of people with schizophrenia and 51 per cent of those with bipolar disorder smoking 20 cigarettes a day, compared to just 8 per cent of the general population. They also tend to be more dependent, and have more difficulty in quitting.

4.5.2 Learning Disability

The Foundation for People with Learning Disabilities quote that 25-40% of people with a learning disability also have mental health problems. This would equate to between 1,060 and 1,696 of the group of 4,240 people with a learning disability in West Berkshire also having a mental health problem.

Valuing People, the White Paper on Learning Disability, estimates that 21.6% of people with a learning disability have dementia, against 5.7% of the general population, and 3% of people with a learning disability have schizophrenia, compared with 1% of the general population.

4.6 Improvement in needs assessment data

Since the 2004-07 Commissioning Strategy the analysis of a Community Needs Survey undertaken by West Berkshire Council, was completed in December 2004, and further analysis of census data, has taken place. In addition the District Profile has been available and maintained since 2005. This progress has provided additional information to inform second the Commissioning Strategy.

Work is ongoing to analyse and explain the discrepancy between the numbers of people receiving services from West Berkshire Council and national prevalence data. This may be partly explained by the relative wealth of the area, which is associated with lower levels of mental health problems, however further work needs to be undertaken to explore these differences and their implications for the future.

The Healthier Communities and Older People's Policy Development Commission, a member led review body, recently considered the impact of West Berkshire's critical level eligibility criteria on access to services. It found no evidence of people being unable to access services as a result of the criteria.

There is anecdotal evidence of an increase in numbers of:

- Young people with Attention Deficit Hyperactivity Disorder (ADHD) moving through transition from Children's into Adult Services.
- Numbers of people with autistic spectrum disorder
- Numbers of people with Korsakow's illness – an early onset dementia associated with alcohol misuse.

Further work will be undertaken to analyse the local impact of these apparent increases, which will inform service commissioning.

In addition, during the term of this document the West Berkshire Joint Strategic Needs analysis will be completed. This is being developed in partnership between NHS Berkshire West and the West Berkshire, Reading and Wokingham Unitary Authorities. Following this, further work will be undertaken to analyse further evidence of local need in terms of mental health, as outlined within the NHS Berkshire West Commissioning Strategy.

4.7 Key messages

- There is a significant increase in numbers of people with mental health problems– see both prevalence data and increasing numbers of people receiving a service from WBC.
- Therefore work to identify the numbers, distribution and needs of people with mental health problems and their families in West Berkshire must continue.
- The numbers of people with complex needs, i.e. mental health problems, learning disability, physical health problems and/or substance misuse problems, has significance for future commissioning, skill mix of teams providing services and staff training.
- Partnership working within the Council and with wider partners, and agreement from stakeholders on the role each service or organisation will take in response to different areas of need, is required in order to address this.
- Recent and ongoing improvements in systems to collect and apply needs information will inform and positively impact commissioning plans during the time span of this strategy, with particular reference to:
 - the impact of rural isolation
 - wider issues around access to service
 - employment needs

5 PATIENT, SERVICE USER AND PUBLIC VIEWS

A combination of approaches has been employed to identify the views of patients or service users and the public about the priorities for mental health services.

5.1 NHS Berkshire West Commissioning Strategy development

The NHS undertook a significant consultation exercise to inform the development of its Commissioning Strategy, and the Health Needs Assessment which underpinned it. This commenced with an engagement exercise which was aimed at identifying the priorities for local people for inclusion in the consultation draft. The draft Commissioning Strategy was then consulted on and refined in the light of comments and suggestions made by patients, service users and the public, as well as other stakeholders.

A number of key themes emerged during this process which are described in more detail in the final version of the NHS Berkshire West Commissioning Strategy:

- Information about services is important and could be improved
- A single point of access and integrated service delivery
- The importance of GP's and the need to improve access
- Equity of access is a priority – an issue for rural areas of West Berkshire
- Investment in the voluntary and community sector is important
- Skills and training for staff to enable them to provide the specialist services required, and also for patients, carers and families is needed.
- A focus on self management and prevention services is important
- Improved Out of Hours support, investment in emergency "crisis" beds, psychology, day provision and counselling accessible through self referral are all important.

5.2 West Berkshire Mental Health Focus Group and West Berkshire Mental Health Steering Group

The Mental Health Focus Group is composed of a variety of stakeholders, including service users and representatives of partner organisations. The Mental Health Steering Group was set up to inform the development of local services, and includes eight service users who were elected by their peers to represent them. Both groups have been consulted on the draft commissioning priorities for the West Berkshire Mental Health Commissioning Strategy – and their previous comments informed the drafting of these priorities.

5.3 Putting People First in West Berkshire

The consultation process undertaken to develop this document has included all of the service user groups in West Berkshire, and users of mental health services will therefore have the opportunity to influence its final draft.

5.4 Ongoing communication and engagement strategy

A specific piece of work will be undertaken to inform the development of Day Opportunities for people with mental health problems, in partnership with the Mental Health Steering Group.

Further work will be done to improve the links between the West Berkshire Mental Health Focus Group and the Berkshire West local Implementations Team, ensuring that local service users and families influence service provision positively.

The Complaints and Public Information Manager will continue to provide summaries of complaints and compliments to the Mental Health Service Management Team, enabling ongoing monitoring of service user satisfaction with services.

A specific piece of work will be done as part of the development of personalised services, to plan the local implementation of individual budgets.

West Berkshire Council and Berkshire Healthcare foundation trust will continue to share information gained through user satisfaction surveys, complaints and serious untoward incident reviews, to inform practice and service development.

6 CURRENT COMMISSIONING POSITION

6.1 The Vision

To enable people with mental health problems to lead as full a life as possible, so that they can make their own choices, achieve their full potential, and participate as full members of their community.

West Berkshire Community Mental Health Services are primarily provided in partnership by West Berkshire Council and Berkshire Healthcare Foundation Trust.

6.2 Primary Care and Tier One Services

A Primary Care Mental Health Strategy was developed in 2004/05 to provide a framework for service development. The current service provision is as follows:

6.2.1 Mental Health Lead GP's

The identified GPs in each practice meet as a group on a quarterly basis with the Locality Manager and the Community Service Manager.

6.2.2 National Health Service Workers

NHS Counsellors and NHS Link Workers are employed by Berkshire Health Care Foundation Trust. These services are well used, highly valued by many patients and General practitioners, and of key importance in terms of meeting the requirements of Standard Two of the National Service Framework. The NHS has committed to the establishment of two additional Graduate Mental Health Worker posts to increase the available capacity for the provision of psycho educational interventions to complement those offered by other NHS workers.

6.2.3 Black and Minority Ethnic Community Development Workers.

The NHS has appointed 3 black minority ethnic community development workers across the NHS Berkshire West area.

6.2.4 Exercise on Prescription

Increasing numbers of referrals are being made to this service for people with anxiety and depression, which has a strong evidence base in terms of its effectiveness for mild or moderate mental health difficulties.

6.2.5 Blues Be Gone

Is a computerised cognitive behaviour programme which is currently being piloted across Berkshire. This programme provides better access for people who wish to complete the programme, and have access to a computer to take the computer disc home and complete the programme in their own home.

6.2.6 Newbury College

Runs the **Choices** programme, which aims to help people with mental health problems to access education and training opportunities.

6.2.7 Mental Health Promotion and Prevention

NHS Berkshire West is accountable to the Strategic Health Authority for Mental Health Promotion into schools, the community and the work place.

The NHS is continuing to develop prevention strategies in the light of increasing numbers of people suffering from mental health problems, and has recently appointed a Head of Health Improvement worker and a lead worker for health promotion for mental health. At present there is a vacancy within the NHS for a strategic lead for health improvement for mental health.

6.2.8 Improving Access to Psychological Therapies

NHS Berkshire West has been successful in obtaining external funding to facilitate the development of the IAPT programme which is designed to improve access to help – particularly for the large numbers of people with mild to moderate mental health problems. The help provided will be evidence based and is likely to be delivered through a variety of providers and arrangements which will be informed by local need.

6.3 Community Mental Health Service

The CMHS for adults of working age has undertaken significant service development and has modernised the service and streamlined access. There is a single point of referral for secondary mental health services, integration of psychological therapies and a "24/7" crisis response home treatment team.

6.3.1 CMHS Service Components

- 2 multidisciplinary Patch Teams, relating to specific GP surgeries.
- Crisis Response Home Treatment Team. This is a jointly funded service, (by West Berkshire Council and Berkshire Healthcare Foundation Trust) providing a service from 9.00am – 9.00pm daily. The team includes Approved Social Workers, Social Workers, Community Psychiatric Nurses, Community Support Workers. Consultant Psychiatrist and Staff Grade Doctor and works closely with both Day and Inpatient services, and WestCall Out of Hours GP Service. The Overnight Crisis Service is operational from 9pm until 9am Monday to Sunday, and provides a service for the Newbury, Reading and Wokingham area. Together, these services ensure a response 24 hours a day 7 days every week.

- Early Intervention in Psychosis Service.
- Assertive Outreach Service.
- Dual Diagnosis Substance Abuse Specialist
- Day Services – Hillcroft day Service is an integral part of the CMHS and provides a flexible service to people with severe and enduring mental health problems, as well as those in more acute need, working closely with the Crisis Response Team. Services include a Horticultural project, various psycho-educational groups and a Social Recreational project one evening a week. It is open from 9.30am to 4pm. The Day Services are currently undergoing a major review and restructuring of the service.
- **The Basingstoke Rape Crisis Centre** holds a weekly clinic at Hillcroft House for service users at a secondary care mental health level to access support, therapy and advice.

6.3.2 Psychotherapy

The Psychotherapy Service based at Winterbourne House in Reading has undergone significant development in the last year, and service provision is still evolving. A Newbury locality link group has been established with effective results providing local provision of psychotherapy groups

- The Newbury Link Group aims to offer a friendly open environment where people can be part of a group which addresses ways of coping more positively with difficulties we may face in our day to day lives.
The group consists of 3 facilitators along with the group members.
The group is not based on delivering therapy, but more on education surrounding certain topics that people may be experiencing problems with, for example:
Assertiveness
Relationships
Goal Setting
Anxiety Management
Our Relationship to Food

6.4 Service User / Carer Involvement

There has been significant improvement in the representation of Service Users at the West Berkshire Focus Group and this is currently as follows:

- Service User Development worker
- Service User Consultant, Berkshire Healthcare Trust Board member.
- Service User Representative of the local Mental Health Forum.
- Service User representative of the Eight Bells for Mental Health Group.
- There are also Service User Led services in place as follows:
- 8 Bells for Mental Health Service User led group which meets twice weekly at Friends Meeting House, and provides support at weekends and bank holidays.
- Plus-People Like Us, a service user led group meet regularly.

6.5 Inpatient Services

These are provided at Prospect Park Hospital in Reading for the West of Berkshire covering Newbury, Reading and Wokingham.

Services for adults include two acute inpatient wards, an Intensive Care Ward, a "place of safety" suite (a purpose designed unit where police officers can convey people who require assessment under the mental health act) and the Champion Unit., for people with Learning Disability requiring assessment in an inpatient setting. In addition, there is a rehabilitation unit for people with severe and enduring mental health problems

and two wards for older people. The Therapy Centre, Pharmacy and Reading Community Mental Health Team are also currently based at Prospect Park Hospital.

The Inpatient Service for people from the previous Newbury and Community PCT area is provided within one of the wards with 27 beds, shared with Wokingham, giving a nominal allocation of 13 beds.

Since the development of a Crisis/Home Treatment Service in West Berkshire, the number of inpatient bed occupancy has fallen significantly with community services supporting large numbers of people within a community setting.

6.6 Residential and Nursing Care

This is provided for people who have more severe and enduring mental health problems, who are not able to maintain independent living for a variety of reasons. A relatively small number of people receive this type of care.

If a person requires healthcare in a residential setting, an application for funding is made to the Continuing Care panel, which applies the Thames Valley wide eligibility criteria to determine funding responsibility. This means that, if a person needs care to be provided by healthcare professionals, then this is funded by the relevant National Health Service.

An even smaller number of people receive treatment in residential units, funded by the NHS, when it is not possible to meet their needs within the locally provided services commissioned by the NHS Berkshire West from Berkshire Healthcare Trust.

Residential and Nursing Care is commissioned from a number of providers, both within and outside our geographical area. It can be very difficult to predict future requirements for this type of support, and therefore financial planning is challenging.

6.7 Respite

Funding from the West Berkshire Council's residential purchases budget, as well as Carer's Grant Funding, or Direct Payments Scheme which enables the client to purchase the respite care they need, of their choice. (where a respite stay constitutes a break for a carer) enables the provision of planned respite for some individuals. People may stay for one or two weeks during a year in a placement suitable for their needs, as part of their Care Plan. A range of providers have been used for this service, and respite stays have frequently been a vital part of a plan enabling a person to avoid unnecessary hospital admission.

6.8 Housing Related Services

The following services are provided or commissioned by West Berkshire Council's Housing Service:

- Housing Strategy, Enabling Asset Development Team

Housing Strategy is developed in partnership with Registered Social Landlords, Developers, representatives of Vulnerable Groups and others to provide a framework for work on housing issues by the council as a whole, as well as its partners. A major part of the work of this team is to secure the development of affordable housing on new housing development sites.

- West Berkshire Mental Health Housing Panel.

A Mental Health Housing Panel has been established in West Berkshire to assist people with mental health difficulties, who need supported accommodation, to access accommodation suitable to meet their needs and assist service users, who are in supported accommodation, to move into more independent

accommodation. The Mental Health Housing Panel consists of representatives from: CMHT, Sovereign Housing Association, West Berkshire Council Housing department, Bromford Housing Association, HVHS Housing Association, Together Housing Association and West Berkshire Council Supporting People Team.

- **Housing Operations**

This team is responsible for working with homeless people and implementing the Homelessness Strategy; for administering the Housing register and for providing Housing Advice.

- **Housing adaptations and renovations**

Disabled Facilities Grants and Housing Renewal Grants are available to people who need to make adaptations to their home in order to meet the needs of a family member with a disability. There are specific eligibility criteria for these grants, and Council staff work in partnership with Occupational Therapists, Home Improvement Agencies and Service Users in order to achieve the desired outcome.

- **Supporting People Team**

This team is responsible for implementing Government policy in the support of all vulnerable people in their tenancies. For people with mental health problems, Supporting people commissions residential – based services from the following providers:

- **Together**
- **HVHS**
- **Bromford**

West Berkshire Council, BHFT and Bromford Housing Association have formed a partnership project called “Fountain Gardens” which provides rehabilitation and supportive accommodation for Service Users. There is also a Home Treatment Flat for service users in crisis, who can stay at the flat for up to 2 weeks and receive intensive home treatment support from the CMHT home treatment team.

Floating support is provided by Call Us and 2 Saints.

These organisations all provide a range of low to medium or higher levels of support, dependent on a person's needs, and all service providers work closely with the Community Mental Health Service.

Challenges are provided by the scarcity of “move on” accommodation for people who are ready to live more independently.

Accommodation for people who need intensive support for a short while outside their own home but who do not require hospital admission, or as an alternative to hospital accommodation.

6.9 Other Council Services

The Housing and Performance Directorate also provides support to local Mental Health Services in the following areas:

- Project Management
- Contract Management
- Welfare Benefits Advice
- Vulnerable Adults co-ordination
- Care Quality Team.

6.10 The Older Persons Mental Health Service

Beechcroft Older Persons Mental Health Service shares the same base (Hillcroft House) as the adult mental health service. This has provided the opportunity for improved joint working. Beechcroft is currently developing a Crisis response/Home Treatment Service within their team.

6.11 The Child and Adolescent Mental Health Service (CAMHS)

This service is based close to the adult mental health service. The development of the Early Intervention in Psychosis service has created opportunities for improved joint working. A Transition Protocol is currently being finalised, to develop that previously in existence, specifying the respective responsibilities of partner organisations.

6.12 Substance Misuse Services

These have been developed with a locally focussed model of provision. A dual diagnosis substance misuse worker is based in the adult mental health service to provide specialist advice for service users with a dual diagnosis, and to provide a link to the local substance misuse service (Turning Point). Support, advice and alcohol/drug work programmes, needle exchange and residential rehabilitation can be accessed through Turning Point. Service users referred to the adult mental health services will receive support and assistance via the substance misuse specialist worker to access Turning Point.

7 STRATEGIC COMMISSIONING PRIORITIES

The national and local policy context have informed the development of the following priorities, as well as the views of local stakeholders:

Personalisation and development of choice and self directed services

- Continue to develop the Care Programme Approach within a recovery framework.
- Increase the number of people using direct payments year on year, while developing a model for the use of personal budgets.
- Continue to develop work with family carers in the assessment of need and provision of effective support.

Day Opportunities

- Develop and implement a socially inclusive model of Day Opportunities provision which meets local need across the district.
- Work effectively in partnership with the voluntary and business sector to increase the number of people with mental health problems staying in or returning to work.
- Develop innovative approaches to the provision of support across the district, working closely with service users and carers to develop and implement plans.

Improving Health

- Address health inequalities issues for people with mental health problems.
- Provide information about health and well being options.
- Ensure that treatment for mental health problems is informed by NICE guidance.
- Improve access to Psychological Therapies.

Housing

- Continue the development of local supported living options to continue to reduce the number of people placed in residential care.
- Ensure that the accommodation provided in residential care for those who continue to need it is of satisfactory quality.

Partnership Working

- Work with local stakeholders to develop and maintain an effective Mental Health Focus Group in West Berkshire, with good links to the Local Implementation Team for Berkshire West.
- Continue implementation of guidance on effective use of resources.

Performance Monitoring

- Ensure that services to people with mental health problems and their families continuously improve by monitoring performance against specific targets and indicators.

Improving Commissioning

- Continue to improve our understanding of local need and forecasting of changes,
- Work with service providers to promote choice, quality and personalisation.
- Develop our Joint Commissioning and our work with Practice Based Commissioners

8 FINANCIAL RESOURCES**8.1 Financial Resources – West Berkshire Council**

The West Berkshire Council Mental Health Services budget includes funding for directly provided services i.e. CMHT and Day Services, as well as commissioned services i.e. residential and respite services. The Council is the employer of Social Care staff, including Day Services staff, Social Workers, Approved Social Workers (who undertake specific responsibilities under the Mental Health Act) Community Support Workers, Business Support and some of the joint funded management team posts.

8.2 Financial Resources – NHS Berkshire West

NHS Berkshire West commissions specialist mental health and learning disability services from Berkshire Healthcare Foundation Trust as part of an overall block contract. The services provided are described below under 8.3.

The NHS has also provided funding for NHS Mental Health Services described in section 6.2.

The NHS also provides continuing care funding for health needs of people with mental health problems. There is no specific budget allocation for continuing care, but the NHS have an obligation to fund continuing care services to meet health needs in accordance with Thames Valley wide eligibility criteria.

8.3 Financial Resources – Berkshire Healthcare Trust

Berkshire Healthcare Foundation Trust (BHFT) is the Berkshire-wide specialist provider of mental health and learning disability services, commissioned by Berkshire West and Berkshire East National Health Services.

These services include inpatient services provided at Prospect Park Hospital in Reading, Community Services in each of the six Berkshire localities, specialist services for example psychotherapy, rehabilitation and medium secure services.

The community service budget for adults budget funds the health staff who work within the Community Mental Health Services (CMHS), including the NHS Care Staff mentioned above, and medical staffing. In addition, premises, utility costs, and other non pay items are included within this budget.

BHFT is the employer of the Nurses, Clinical Psychologists, Occupational Therapists and Consultant Psychiatrists working in the CMHS, and the responsibility for this budget is held by the Locality Manager, delegated to the Community Services Manager – both of which are joint funded and jointly accountable to West Berkshire Council and Berkshire Healthcare Foundation Trust.

8.4 Supporting People

The Supporting People (SP) Programme is a national initiative designed to provide housing related support enabling vulnerable people to live as independently as possible in a variety of settings. As such, Supporting People funds schemes supporting services users across all social services departments. Approximately 9% of this allocated to schemes supporting people with mental health problems.

The residential schemes are provided by Bromford Housing, Together and Paramount Housing, with Call Us providing "floating support" in a flexible way in people's own homes.

The SP budget has been reducing over recent years and is likely to be under continued pressure. It forms part of the Area Based Grant from 2008 onwards, which the Local Strategic Partnership will monitor in line with its strategic priorities contained within the Local Area Agreement.

8.5 External Funding Sources

European Social Fund and Community Fund monies were secured to support the development of the service provided by Resource in Newbury. This was a significant development for local services, although it ultimately proved not to be sustainable within the model which was developed. It remains an important priority to establish a strong partnership with the voluntary sector for the provision of Day Opportunities for people with mental health problems, and through this partnership, to seek external funding opportunities.

8.6 Future Financial Resources and key funding messages

- Further work is required to identify the financial implications of the apparent growth in demand for mental health services for people in transition from Children's into Adult Services, in addition to the costs of implementation of the guidance published by the National Institute for Clinical Excellence.
- Activity and quality standards will be negotiated with Berkshire Healthcare Foundation Trust in relation to the block contract, enabling greater clarity about output in relation to commissioned service.
- Work will be undertaken to explore opportunities for joint commissioning between West Berkshire Council and NHS Berkshire West. This will enable greater flexibility in the use of resources, and enable the joint team manager (responsible for both health and social care staff) to use the budget more effectively to match the team skill mix to identified client needs, reducing cross- invoicing between organisations.
- The BHFT budget for the Older People's Service will be transferred to the locality, enabling more effective planning of services across age groups, to ensure local sensitivity. This issue will be addressed within the Older People's Commissioning Strategy.
- Supporting People funding will be reduced over the next few years. Some savings will be identified at service reviews, and some by the identification of non housing- related support which may require Social Services funding. This will be addressed through a managed process by the Head of Service and Corporate Director of Community Services.
- Funding for new mental health workers and early interventions services required by the National Service Framework is routed through health organisations, but not ring fenced. Pressure on Health budgets and focus on other priority areas has not compromised our ability to establish new services, but remains a potential risk.

- Analysis undertaken by NHS Berkshire West as part of its utilisation management work, has identified the importance of mental health issues as a factor in the length of admissions to hospital for non-mental health reasons. Work is currently underway to identify the most effective use of community mental health services in the prevention of unnecessary admission to hospital.
- The new Mental Health Act and Mental Capacity Act will require significant development in mental health services in terms of access to independent advocacy and provision of appropriately trained staff. Some additional funding has been made available to meet these requirements, but will not cover full costs of the required changes.
- The delayed discharge fine system which has been in place within the Acute Hospital Sector may well be applied to mental health services. Again, it is uncertain if monies would be available to support required work, and this could place significant additional pressure on Social Care budgets.
- Work will be undertaken to ensure all those people who are entitled to Independent Living Fund monies, will be able to utilise it to fund services to meet their individual needs.
- Opportunities to secure external sources of funding, where possible in partnership with voluntary sector service providers will be fully exploited in future.
- Further reengineering of services will be undertaken over the next three years, to ensure that available resources are used effectively to meet individual needs. This will mean reorganisation of budgets, and changes in patterns of funding in line with strategic objectives.
- The increased use of Direct Payments and Individual Budgets will influence the type of services funded, as individual service users are supported in exercising choice about the care they receive.

9 DEVELOPING THE COMMISSIONING FUNCTION

9.1 National requirements

Putting People First requires Social Care organisations and their partners to achieve "significant change" by 2011 in services commissioned or directly provided. The Department of Health requires the NHS to achieve specific competencies to become "World Class Commissioners". West Berkshire Council and NHS Berkshire West will therefore be working together to improve the commissioning process itself, building on the progress achieved since the publication of the last Mental health Commissioning Strategy.

9.2 Local engagement

This strategy has been informed by the views of service users and their families as well as other stakeholders. We need to continue to develop our engagement with service users and the public, and strengthen the links between our local Mental health Focus Group and the Berkshire West Local Implementation Team to inform the development and implementation of plans.

9.3 Needs Assessment

We recognise the need to continue to improve our understanding of the needs of people with mental health problems through improved information systems which capture issues identified through assessment and care planning. In addition, it is our aim to undertake a mental health specific Joint Strategic Needs Assessment to further inform our strategic planning.

9.4 Procurement and contracting

We will use robust procurement processes and aim to balance the need for value for money and long term planning, with the requirement for increased individual choice and control and development of personalised services. Our contracts will be clear, and contain our requirements for service quality and activity.

9.5 Quality and Effectiveness of Care

We will make use of external monitoring undertaken by the Healthcare Commission and Commissioning for Social Care Inspection (CSCI), alongside local information provided by service users and stakeholders to monitor the performance of directly provided and commissioned services. Safeguarding will be given a high priority, and we will undertake a review of services in the light of CSCI Inspections standards to ensure that we safeguarding principles are embedded within our commissioning function.

9.6 Value for Money

We will ensure that we make the best use of resources by assessing the cost effectiveness of local services against national average performance, and making improvements where required.

9.7 Joint Commissioning and Practice Based Commissioning

We have stated our aim to develop our joint commissioning work to ensure good use of resources and integration of services. The local Health and Well-being Strategy review planned for 2009 will include actions to promote mental health and achieve a good level of performance against our Local Area Agreement targets. We aim to work with Practice Based Commissioners to develop innovative approaches to mental health service provision locally, and integrate this with our joint commissioning plans.

9.8 Implementation Plans

The aims and priorities of the West Berkshire Mental Health Commissioning Strategy will be implemented through the local Service Plan process. This ensures the production of an annual Service Plan which is monitored within West Berkshire Council, and includes both health and social care targets as appropriate for an integrated service. In addition, the local Mental Health Focus Group will review progress in achievement of the strategy, which will in turn be reported to the Berkshire West Local Implementation Team.