Service Plan outturn 2007/08

Mental Health services

Achievements

- The Partnership arrangements and agreement have been revised and will be signed off by the Primary Care Trust/City of York Mental Health Partnership Board at its next meeting.
- Budgets were under-spent. However there remain risks in respect of increased Council contributions that may be required to support placements of people currently supported within one specific establishment.

Critical Success factors

Development of Joint Health & Social care Mental Health Strategy

This strategy has been developed and is currently being finalised to be signed off by the Primary Care Trust/City of York Mental Health Partnership Board at its next meeting. The strategy is one that cuts across all ages and sectors.

Improve staff retention and workforce planning in terms of Approved Social Workers (ASWs) and Approved Mental Health professionals (AMHPs) from 1 April 2008

There has been little turnover and need for recruitment of Approved Social workers during 2007/08. The planning for the development of the Approved Mental Health professional role has been undertaken through the joint arrangements with the Primary care Trust. Training is currently being planned. The Primary care Trust is considering the implications of the recruitment to this role of NHS staff.

Implement the requirements of the Mental Capacity Act from 1 April 2007 (1st stage) and from 1 October 2007 (2nd stage), in terms of IMCA service,

All preparatory work was undertaken & completed prior to the implementation dates.

The IMCA service has been commissioned jointly with North Yorkshire Council and is being provided by `Cloverleaf'.

Staff have had the relevant training in awareness, capacity and Best Interests determination.

Prepare for the mental Health Act Amendment Bill

The Local Mental capacity Act Implementation network is now planning for the implementation of amendments that cover Deprivation of Liberty and are monitoring implementation of the act.

ESCR- electronic record keeping

The new data system was successfully implemented from July 2007 through to the autumn. The training for Frameworki was delayed for CMHT staff, due to pressures on time and availability of all concerned, including the trainers, and it also took time to gain a complete understanding of how mental health practitioners would use the system compared to other parts of HAAS. There remain issues about people's levels of

confidence with the system. The delay will have had an impact on the Performance Indicator figures as there has been a decline. However, the system has enabled front line staff to take much more ownership of data entry and in be more streamlined in how they manage their records, which in itself in the longer rum should improve performance outcomes.

The introduction of the new system to one of working entirely electronically was a considerable challenge to traditional working practices and one which has been taken on remarkably well by the staff. Congratulations are appropriate to those who planned and implemented the programme, those who supported the frontline staff through the change and the frontline staff themselves.

In respect of expenditure there is a small (at present) increase in the number of more expensive placements required where customers have more complex needs. This will be monitored in case of any future budget pressure.

Budget

The table below sets out the major variations from the approved budget

MENTAL HEALTH	Budget £'000	Variation £'000	Variation %
Community Support – Increase in costs due to more customers receiving community based support	26	+23	+88.4
Residential & nursing – Fewer placements made. Potential financial impact of changes in one establishment - not reflected in these figures.	1,281	-177	-13.7
Drug and Alcohol Rehabilitation – no placements made against this budget 2007/08	18	-18	-100.0
Social Work Team and Rehab and Recovery Team – posts still remain vacant as difficulty in recruiting staff within certain teams continues.	417	-83	-19.9
Mental Health Manager – money held back for use on matters arising from implementation of Mental Capacity Act not used	62	-24	-38.7
Sycamore house – underspend due to staff vacancies	319	-24	-23.9
Other minor variations	146	+14	+9.6
Total Mental Health	2,269	-289	-12.7

Customer based improvement

Measure	Current	2007/08 Target	2008/09 Target	2009/10 Target
Number of people under 65 with MH	0	1	2	3
problems receiving direct payments				
HCOP 8.1 number of people 18-64 with	1.97	2.3	2.2	2.3
MH problems whom authority helps to live				
at home, per 1,000 adults Care & non-care				
managed				
HCOP8.3 People 18-64 with supported	1.04	1	1	1
admissions to registered care				
HCOP10.1 Number of separate carers	267	507	519	552
assessments completed (including self				
assessments).				
All adult customer groups				
HCOP10.2 % of people under 65 with				
MH problems whose careers receive a				
specific carers service (PAF C62).				
All adult customer groups	3.61%	6%	9.00%	9.68%
HCOP 8.7 Customers receiving housing	236	80	To be	To be
support with mental health problems			revised	revised

Process based improvement

Measure	Current	2007/08 Target	2008/09 Target	2009/10 Target
BV 195, D55 (PAF) - % under 65 with MH problems receiving assessment within specified time scale (2 days)	71.5	76.5	80	80
All adult customer groups				
BV 196, D56 (PAF) % of new customers under 65 with MH problems receiving package of care within specified time scale (28 days)	92	85	92	93
All adult customer groups				
BV58 (PAF D39) %age of people receiving a statement of their need and how they will be met (all customer groups)	94	92	93	94
%age of adult users assessed and/or reviewed in the year that had ethnic origin missing or not stated	5.5	Less than 10%	Less than 10%	Less than 10%
New or revised local policies and protocols required by Mental Capacity Act		As per timetable for Act		