

## CHAPTER 8

### IMPLEMENTING THE STRATEGIC FRAMEWORK

#### INTRODUCTION

8.1 The policy for a new Adult Mental Health Strategy, incorporating the 10 standards for service development outlined in Chapter 1, together with the detailed evidence based recommendations in Chapters 3-6 provide a comprehensive blueprint for realising the new vision for Adult Mental Health Services. In Chapter 7 consideration has been given to the infrastructure requirements of the Service Framework. Consideration must also be given to the processes by which the new Strategic Framework for Adult Mental Health can be realised. Three processes are considered fundamental to successful implementation:

- regional support for change
- local implementation
- performance assessment

#### **Regional Support for Local Implementation**

8.2 Department of Health, Social Services and Public Safety (the Department) has been generative in establishing the External Review, responsible for the crafting of this Strategic Framework for Adult Mental Health. The Department has also worked in close partnership with the External Review to define and clarify the infrastructure issues on which the Service Framework depends, including workforce, costings and information.

8.3 The Department will play a key role in delivering workforce and information strategies, overseeing the roll-out of the Strategic Framework to agreed standards and timescales and securing funding. Implementation should be directed by an Implementation Team. Within HPSS organisations, the new Duty of Quality will drive the quality agenda, underpinned by Health & Social Care Governance. The Department must ensure engagement of other Government Departments so that those elements of the Strategic Framework outwith health and social care are delivered both successfully and on time.

- 8.4 The success of the Strategic Framework depends on many stakeholder groups, the support of Government and the wider public. The Implementation Team with the support of the Department have an important role in facilitating the processes necessary for engagement and communication with all stakeholder groups and for the broad agenda of change management.

### **Local Providers**

- 8.5 Local providers will ultimately be responsible for ensuring the implementation of the Framework and must translate it into local delivery plans. This, in turn, requires local partnerships with all relevant statutory and voluntary providers and a shared vision.
- 8.6 The Strategic Framework brings a new opportunity for change, with a clear statement of what has to be done and firm performance management. It provides a sound evidence base for action together with examples of good practice.
- 8.7 Translating the regional Strategic Framework into effective local implementation arrangements will present significant challenges for professional staff, management and local service leaders. It envisages a broad-based and complex reform of mental health services. It is also occurring in the context of anticipated substantial reorganisation and re-configuration of health and social services and local administration. A major challenge is the change in culture necessary to deliver this Framework.
- 8.8 Keeping the perceptions and needs of service users and carers at the centre of our vision will, therefore, be most important throughout the change process. The involvement of service users and carers can greatly assist the realisation of a new vision and a new culture at local level. Barriers to change must be recognised, identified and overcome. The current interest, commitment and skill of professional staff, service managers and service leaders provide a sound foundation on which to build the local implementation of the Strategic Framework. There is much to be gained by collaborative learning and working across provider groups, sharing examples of good practice, exploring opportunities for complementary contributions

to, in particular, more specialist services, and working opportunities for joint initiatives in staff training.

*Good Practice Example*

**Getting Better Together.** *Trent & Northern Yorkshire NHS and the Northern Centre for Mental Health jointly commissioned this Mental Health Collaborative. The aim of the project was to improve service users' experiences of acute inpatient care and achieve better outcomes throughout the process of admission, stay and discharge. The collaborative placed an emphasis on joint working to achieve mutually desirable results. It has made a significant move away from "the hero-innovator" towards a more empowering means of creating sustainable change through the utilisation of shared perspectives of jointly owned goals." There is clear evidence that the collaborative has been successful in improving service users' experience of acute inpatient psychiatric units and achieving better clinical outcomes."*  
*Hugh Griffiths, Clinical Lead Mental Health Collaborative (Contact 0191 370 7760).*

## **ENSURING PROGRESS – PERFORMANCE ASSESSMENT**

8.9 The Strategic Framework represents an ambitious agenda for change within Adult Mental Health Services aimed at driving up quality across all aspects of services. In Chapter 1 ten Standards for service development were identified. Each Standard provides a central pillar of the Strategy around which succinct areas of service development and improvement must be built (see Recommendations). To ensure progress in each of the ten areas it is essential that a number of indicators are specified and against which progress on implementation can be measured.

Performance Indicators can measure:

- inputs to the Strategic Framework, such as the allocation of specific resources;
- processes, such as the establishment of new service elements for improvements within existing services;
- outcomes, including users and carers' experience of service, health outcomes, improvements in social functioning.

8.10 Outcomes, including user and carer experience of services, are the ultimate test of service effectiveness. An important objective of the Framework is the development and implementation of suitable outcome measures of known provenance. Nevertheless specific service processes which have an evidence based relationship with outcomes provide important measures of service quality and effectiveness. Performance indicators, based on process measures, eg the establishment of Crisis Response Services, provide a basis for monitoring and evaluating progress on implementation of the Strategic Framework. A set of performance indicators for each Standard are presented in the following Table.

## Standard 1. Services to be Person-Centred

Performance Indicators	Targets	Milestones	Lead Responsibility	Information and Sources
Providers adopt a planned approach to the whole system of service provision	Whole system strategic plans	Year 1	Local Mental Health Service provider (MHS)	Submission of strategic plans by providers to Commissioners and Department
Strategic plans for inpatient services	Review of inpatient services.  Strategic plans completed.	Year 1	Local MHS provider and DHSS&PS  Local MHS provider	Local Information Provider (LIP) confirmation LIP confirmation
Service users and carers must be involved in mental health service planning, development and delivery monitoring	Representative user and carer involvement in planning and development  Delivery, Monitoring and Evaluation  Comprehensive infrastructure to support users & carers	Year 1  Year 2  Year 2	Local MHS provider	LIP confirmation
Service vision, plans and strategy must be needs driven.	Local assessment of need	Year 1	Local MHS provider	LIP confirmation
In addition to meeting the equality obligations under Section 75 of the Northern Ireland Act 1998, service users specific communication, cultural, spiritual and religious needs recognised and acknowledged	Culture sensitive information and communication provision  Information accessible to people with a learning disability	Year 2  Year 2	Local MHS provider	LIP confirmation
Comprehensive advocacy services	Accessible independent advocacy services	Year 2	Local MHS provider	LIP confirmation

## Standard 2. Effective Primary Care Services

Performance Indicators	Targets	Milestones	Lead Responsibility	Information and Sources
Primary care mental health services must have service users and carers involved in development, delivery and monitoring of services	Service user and carer participation on Local Primary Care Groups	Year 2	Local Primary Care Group (LPCG)	LPCG confirmation
Primary care team access to a named mental health professional	Named mental health professional	Year 1	Local MHS provider	LPCG confirmation
Screening arrangements for perinatal mental health	Perinatal screening	Year 2	LPCG	LPCG confirmation
Multi-disciplinary protocols for medication management for depression	Agreed protocols for depression	Year 2	LPCG	LPCG confirmation
Access to high standards of psychological care and therapy	Therapists have assured levels of qualification and supervision  Agreed access to psychological therapies. - 50% - 100%	Year 5  Year 7 Year 12	LPCG  LPCG and local MHS provider	LPCG confirmation  LPCG confirmation

### Standard 3. Effective Community Mental Health Services

Performance Indicators	Targets	Milestones	Lead Responsibility	Information and Sources
CMHTs must be adequately staffed with a range of health and social care professionals	30 care staff per 100,000 adult population	Year 3	Local Mental Health Service providers	LIP confirmation
	50 care staff per 100,000 population	Year 7		
People with severe and enduring mental illness offered yearly assessment by CMHT	Annual assessment completed for 80% of service users	Year 3	Local MHS provider	LIP confirmation
	Annual assessment completed in 90% of service users	Year 5		LIP confirmation
Separate age appropriate services for younger people with a first episode of psychosis	First episode services - coverage 50% - coverage 100%	Year 3	Local MHS provider	LIP confirmation
		Year 5		
Services for people with mild learning disability	Local assessment of need	Year 1	Local MHS provider	LIP confirmation
	Local service agreement in place	Year 2		
Local arrangements for people growing older with enduring or relapsing mental illness	Local needs assessment.	Year 1	Local MHS provider	LIP confirmation
	Local service agreements in place	Year 2		
Services for people with challenging behaviour	Needs assessment completed	Year 2	Local MHS provider	LIP confirmation
	Low secure provision strategy agreed	Year 3		
	In-patient and community provision in place	Year 5		

<b>Performance Indicators</b>	<b>Targets</b>	<b>Milestones</b>	<b>Lead Responsibility</b>	<b>Information and Sources</b>
Provision of services for people with dual diagnosis	Needs assessment completed  Strategy for people with dual diagnosis	Year 3  Year 5	Local MHS provider	LIP confirmation
Mental health services for people in acute hospital settings including A&E	Liaison service needs defined by each acute hospital  Agreed services established	Year 2  Year 5	Acute services providers  Acute service providers	LIP confirmation
Effective services for women at risk of mental illness including relapse or recurrence of serious mental illness in the perinatal period	Locally agreed protocols	Year 5	Local obstetric services and local MHS provider	LIP confirmation
Meeting the physical health needs of people with severe mental illness (SMI)	Locally agreed protocols	Year 2	Local MHS provider and LPCG	LIP confirmation

**Standard 4. Effective Crisis Services**

<b>Performance Indicators</b>	<b>Targets</b>	<b>Milestones</b>	<b>Lead Responsibility</b>	<b>Information and Sources</b>
High fidelity Crisis Resolution (CR) Services established for each provider catchment area	CR services established for 50% of catchment area.  CR services established for 100% of catchment area	Year 1  Year 3	Local MHS provider	LIP confirmation
Day hospital and step up residential services established within each provider area	Day hospital or step-up services established.  Day hospital and step-up services established.	Year 3  Year 8	Local MHS provider	LIP confirmation

**Standard 5. Optimal Recovery Assured**

<b>Performance Indicators</b>	<b>Targets</b>	<b>Milestones</b>	<b>Lead Responsibility</b>	<b>Information and Sources</b>
The needs of those with severe enduring mental illness should be clearly defined for each provider catchment area	Needs assessment completed for SMI	Year 1	Local MHS provider	LIP confirmation
Community services for promoting recovery established by each MH service provider	Community rehabilitation services	Year 3	Local MHS provider	LIP confirmation
Assertive community treatment teams established for service users with highest level of disability and vulnerability	ACTs established - coverage 50% - coverage 100%	Year 3 Year 4	Local MHS provider	LIP confirmation

## Standard 6. Sustaining Meaningful Lives

<b>Performance Indicators</b>	<b>Targets</b>	<b>Milestones</b>	<b>Lead Responsibility</b>	<b>Information and Sources</b>
People with SMI should be provided with appropriate opportunities for education, training and occupation	Occupational assessment including yearly review - 50% - 80%	Year 1 Year 3	Local MHS provider  Local MHS provider	LIP confirmation  LIP confirmation
	A comprehensive range of occupational services	Year 5	Local MHS provider	LIP confirmation
	Vocational specialists appointed	Year 5	Local MHS provider	LIP confirmation
	A comprehensive range of day care services	Year 5		
A comprehensive range of accommodation for people with severe and enduring mental health needs	Discharge protocols for accommodation needs - 50% - 80% - 100%	Year 1 Year 2 Year 3	Local MHS provider	LIP confirmation
	Choice of accommodation appropriate for need - 50% - 90%	Year 5 Year 10	DSD	LIP confirmation
Exemption to the single room rent for people with SMI	Exemption provision	Year 2	DSD	DHSS&PS
Exemption from prescription charges for people with SMI	Prescription exemption	Year 2	DHSSPS	DHSS&PS
Provision of intensive support for those wishing to get back to work	Intensive support - 50% - 70% - 90%	Year 3 Year 5 Year 10	Local MHS provider and DEL	LIP confirmation

### Standard 7. Meeting the Needs of People with Special Needs

<b>Performance Indicators</b>	<b>Targets</b>	<b>Milestones</b>	<b>Lead Responsibility</b>	<b>Information and Sources</b>
A tiered strategy for people with eating disorder	Needs assessment  Regional strategy	Year 1  Year 2	DHSSPS	DHSSPS
A tiered strategy for people with brain disease or injury	Needs assessment  Regional strategy	Year 2  Year 3	DHSSPS	DHSSPS
A tiered strategy for deaf people with mental health problems	Needs assessment  Regional strategy	Year 2  Year 3	DHSSPS	DHSSPS
A tiered strategy for able adults with ASD	Needs assessment  Regional strategy	Year 2  Year 3		
A tiered strategy for psychological services including services for people with psychological trauma and psychosexual disorders	Needs assessment  Regional strategy	Year 2  Year 3	DHSSPS	DHSSPS
A tiered strategy for people with personality disorder	Needs assessment  Regional strategy	Year 2  Year 3	DHSSPS	DHSSPS

**Standard 8. Meeting the Information and Support Needs of Service Users, Carers and Families**

<b>Performance Indicators</b>	<b>Targets</b>	<b>Milestones</b>	<b>Lead Responsibility</b>	<b>Information and Sources</b>
Existing policy and legislation relating to users and carers	Implementation of existing policy and legislation mostly implemented fully implemented	Year 2 Year 5	Local MHS provider	LIP confirmation
Information and education for users and carers	Basic information education and support  Comprehensive information, education and support	Year 1  Year 3	Local MHS provider	LIP confirmation
Carers should be offered an annual assessment and a written care plan	Annual assessments and written care plans partly implemented fully implemented	Year 3 Year 5	Local MHS provider	LIP confirmation
Providers should make available support for carers including dedicated carer and family workers	Carer and family workers appointed partly implemented fully implemented	Year 3 Year 5	Local MHS provider	LIP confirmation
Suitable hospital visiting arrangements for families including children	Visiting arrangements for families partly implemented fully implemented	Year 3 Year 5	Local MHS provider	LIP confirmation
Agreed protocols between children's and mental health services for children requiring protection	Protocols agreed  Protocols partially implemented  Protocols implemented fully	Year 2  Year 3  Year 5	Local MHS provider	LIP confirmation

## Standard 9. Ensuring Sound Information for Mental Health

Performance Indicators	Targets	Milestones	Lead Responsibility	Information and Sources
Baseline information on current services	Baseline information	Year 1	Local MHS provider	LIP confirmation
Mental health information strategy	Agreed MHIS	Year 1	DHSSPS	DHSSPS
Agreed Indicators for roll out of MHIS	To be agreed	To be agreed	DHSSPS	DHSSPS
Development and implementation of agreed mental health outcome measures including measures appropriate for people with special needs	Agreed outcome measures for use in secondary care services	Year 2	DHSSPS	DHSSPS
	Agreed outcome measures for use in specialist services	Year 3	DHSSPS	DHSSPS
	Incorporation of clinical outcome measures into PCIS and supported in routine clinical practice	Year 5		
User and carer evaluation of services	Baseline user and carer evaluation completed  User and carer evaluation of services implemented at local provider level  User and carer re-evaluation of services	Year 1  Year 2  Year 3, Year 7, Year 10		
An NI R&D Strategy for Adult Mental Health Services	Agreed first phase of R&D Strategy (Years 1-5)	Year 1	DHSSPS	DHSSPS

**Standard 10. Delivering an Effective, Competent and Confident Workforce**

<b>Performance Indicators</b>	<b>Targets</b>	<b>Milestones</b>	<b>Lead Responsibility</b>	<b>Information and Sources</b>
A comprehensive workforce strategy for adult mental health	Agreed strategy	Year 1	DHSSPS	DHSSPS
A strategy for workforce recruitment	Strategy implementation targets to be agreed	To be agreed	DHSSPS	DHSSPS
A strategy for multi-disciplinary training appropriate for CMHTs, rehabilitation, other community teams and hospital based staff	Agreed strategy for workforce skilling	Year 1	DHSSPS	DHSSPS
	Implementation targets to be agreed	To be agreed	DHSSPS	DHSSPS
Agreed strategy for psychological therapies training including the requirements for psychological trauma, eating disorder and psychosexual disorder	Agreed strategy for psychological therapies	Year 1	DHSSPS	DHSSPS
	Implementation targets to be established	To be agreed	DHSSPS	DHSSPS

