



Department of

**Health, Social Services
and Public Safety**

An Roinn

**Sláinte, Seirbhísí Sóisialta
agus Sábháilteachta Poiblí**

www.dhsspsni.gov.uk

Office of the Chief Medical Officer

Mr Sean McKeever
Chief Executive
Southern Health & Social Services Board
Tower Hill
Armagh
BT61 9DR

Castle Buildings
Stormont Estate
Belfast BT4 3SR
Tel: 028 90 520563
Fax: 028 90 520574
Email:
Michael.mcbride@dhsspsni.gov.uk

Your Ref:
Our Ref:
Date: 13 August 2007

Dear Mr McKeever

RE: SERVICE FRAMEWORK – MENTAL HEALTH AND WELLBEING

On behalf of the Department we would like to thank you for agreeing to the Southern Health and Social Services Board leading on the development of the service framework for mental health and wellbeing which will be jointly chaired by Mrs Fionnuala McAndrew and Dr Stephen Bergin. Attached are the terms of reference for the service framework. A resource of up to £30k will be available to assist in project management and service/public engagement. Veronica Gillen, based in the Department, veronica.gillen@dhsspsni.gov.uk, is the project manager for all service frameworks, and may be able to assist by providing some additional business support to develop the mental health and wellbeing service framework approach.

Whilst not wishing to be prescriptive about the configuration of your steering group or any sub groups, we would ask you to ensure that the service framework:

- a. is evidence based;
- b. has appropriate multidisciplinary participation to include clinicians, social care, public health, senior management, financial/commissioner expertise and user/carer representation;
- c. recognises that the majority of care is delivered in the primary/community sectors with active participation of individuals and carers;
- d. acknowledges that care goes beyond traditional HSC boundaries; and,
- e. has an external quality assurance mechanism.

We will shortly provide you with relevant policy documents following a trawl through the Department and external trawl. In addition, a standardised template will be sent to you to ensure consistency of approach across all service frameworks.

We fully understand that completion of this work requires considerable work by you and your colleagues. Should, at any time, you feel that you would wish to clarify arrangements or to highlight concerns, please do not hesitate to contact us

As the development of service frameworks is a new journey for both the Department and the HSC, we would be most grateful if there could be Departmental representation on your steering group. This is to ensure that we learn from your experiences and adapt the service framework methodology, as appropriate.

Yours sincerely

Dr Michael McBride
Chief Medical Officer

cc: Dr Briscoe
Mr Hamilton
Project Team
Dr Bergin
Ms McAndrew

SERVICE FRAMEWORK FOR MENTAL HEALTH AND WELLBEING

1.0 Introduction

A Service Framework is a document which contains explicit standards underpinned by evidence and legislative requirements. Service Frameworks will set standards, specific timeframes and expected outcomes designed to:

- improve the health and social wellbeing of the population of Northern Ireland;
- reduce inequalities and promote social inclusion;
- improve the quality and safety of care;
- safeguard vulnerable individuals and groups; and,
- improve partnership working with other agencies and sectors.

Each Service Framework document will be the subject of public consultation and will be developed in collaboration with HSC staff and through engagement with patients, clients, carers, the wider public and other key stakeholders.

This Service Framework will be used by the public, HSC commissioners, HSC and other providers, and those organisations which are required to report on the performance and quality of services and care.

2.0 Aim

The overall aim of the Mental Health and Wellbeing Framework is to improve the mental health and wellbeing of the population of Northern Ireland, promote social inclusion, reduce inequalities in health and improve HSC quality of care.

Achievement of these aims goes beyond traditional health and social care boundaries and is strongly influenced by population/individual attitudes and behaviours, and the contribution of carers and other sectors.

3.0 Definition

The Mental Health and Wellbeing Service Framework will be based on:

- population approaches to the promotion of health and prevention of disease, recognising that the incidence of mental illness is linked to social and economic inequalities and social exclusion;
- best available evidence; wherever possible, this will be well-conducted, up to date, systematic reviews of valid, relevant evidence;
- an acknowledgement of the individual as an expert in his/her own life and care, and his/her familial and social context;
- the promotion of independence, self help and self directed support through the active participation of the patient, their carer and the wider community;

- the prevention (primary, secondary and tertiary), assessment, diagnosis, treatment, monitoring, care, support, and rehabilitation relevant to those areas identified in paragraph (4.0) below, to include treatment and care in the primary, community and secondary sectors, promoting intersectoral and multidisciplinary working, where appropriate;
- existing policies and strategies already endorsed by the Department through formal publications or circulars and links with national standard setting bodies; and,
- the standardised template as agreed by the Departmental Service Framework Steering Group (this includes a definition of a standard, performance indicators and audit criteria).

4.0 Scope

The Mental Health Service Framework will address prevention, assessment, diagnosis, treatment, protection, care and support for individuals/communities, who currently have or are at greater risk of developing a mental disorder. It will recognise the importance of the social and psychological impact on mental health and wellbeing, and the need to promote interventions which enhance self management, reduce harm and integrate care and discharge planning. The Service Framework will include specific standards for:

4.1 Child and adolescent mental health and wellbeing , to include:

- Attention Deficit Hyperactivity Disorder (ADHD);
- Conduct disorders;
- Emotional disorders;
- Eating disorders;
- Reduction of self harm/suicide; and,
- Drug / alcohol misuse.

4.2 Adult mental health and wellbeing to include:

- Impact of long term conditions on mental health and wellbeing;
- Anxiety disorders;
- Reduction of self harm/suicide;
- Depression;
- Severe mental illness;
- Drug / alcohol misuse;
- Eating disorders; and,
- Personality disorders.

4.3 Mental Health of Older People, to include:

- Dementia (recognising that pre-senile dementia occurs);
- Anxiety disorders in older people; and,
- Depression in older people.

The Service Framework will follow a lifecycle approach, from childhood to adulthood, noting the importance of effective transition arrangements to ensure continuity of care between adolescence and adulthood, and the specific needs of older people to promote positive mental health and wellbeing and ensure effective interventions and support for this population group. It will link with national evidence based standards, e.g., NICE, SCIE, and SIGN and key policy documents including the *Reform and Modernisation of Mental Health and Learning Disability Services* (May 2007) and associated Reports, the forthcoming Government response to the Bamford Review (Autumn 2007), Child Protection Standards (2006), DHSSPS Suicide Prevention Strategy (2006) and other relevant health promotion documents.

5.0 Timed Objectives

The development work on the Mental Health and Wellbeing Service Framework will be co-ordinated via the Southern Health and Social Services Board. The joint chairmanship (health and social care) of the Mental Health Steering Group will ensure active service user and carer participation, a range of social, clinical, public health, commissioners, senior management and financial expertise, taking account of the need to engage across the primary and secondary care interface and drawing on already established networks and groups. The joint chairs will:

- provide a short project plan setting out details of proposed methodology;
- provide the Department with monthly progress reports (no longer than 1 page), which should identify any potential major cost consequences arising, taking account of paragraph 1.7 of the Mental Health Service Framework Template on resource implications;
- engage with the Departmental Steering Group, as required;
- ensure external quality assurance (at national level) of the draft document, to include at least two recognised experts;
- submit a finalised consultation document to the Department by 1 April 2008; and,
- thereafter, engage with the Department, (which will be responsible for consultation), regarding analysis of consultation responses and finalisation of document by 30 September 2008.

A resource of up to £30 K will be provided to assist in project management and service/public engagement, subject to the proposed financial commitment being endorsed by the Safety, Quality and Standards Directorate.

**Safety, Quality and Standards Directorate
August 2007**