

Health and Adult Care Cabinet Panel Tuesday 6 December 2011

Agenda Item 4: Transformation of Day Opportunities provided by Hertfordshire Partnership NHS Foundation Trust (HPFT)

Introduction	
1	<p>Carers in Hertfordshire administers a County-wide Forum for carers of adults with mental health problems which meets bi-monthly. The Forum enables carers to meet together to discuss issues of importance to them, to respond to consultations about changes in mental health and social care services and to have input into service planning and development through the carer representatives who attend the Mental Health Strategic Commissioning Group and the working groups that report to it.</p>
2	<p>The Mental Health Carers Forum met on 23rd November to discuss the proposal to transfer responsibility for providing Day Opportunities for those adults with mental health problems who meet the County Council's Fair Access to Care eligibility criteria from HPFT to a number of, primarily, voluntary sector providers. The carers had already received a copy of the Joint Commissioning Team factsheet which explains the proposals from Carers in Hertfordshire together with details of the local road shows which the JCT is organising, as these have become available.</p> <p>The carers who attended the Forum asked that their comments and concerns be reported to the Panel.</p>
Comments and Concerns	
3	<p>(a) A number of carers were already familiar with some of the services provided in Hertfordshire by the voluntary sector and had found these to be of positive benefit and of good quality. However carers had little clear idea of what range of services the voluntary sector currently provides across the county and what services would be available in the future. There had been a lot of focus on</p>

	<p>'personalised services' and 'services that promote recovery' but little definite information about what these would consist of and where they will be located. This is leaving carers and service users feeling very uncertain and worried about future provision and about the pace of the proposed changes. They fear the loss of the services that they currently depend upon and are unsure about what may take their place.</p> <p>Carers would welcome a comprehensive map of current services and a similar map indicating the new service provision that will be available. They recognise that new services will evolve but need some certainty about what will be in place after the changes have been introduced.</p>
(b)	<p>A number of carers commented that the person they care for finds it very difficult to engage with any services - the carers felt that 'buddy' or 'befriending' schemes were needed so that there would be a worker available to accompany a service user to the gym, college, the cinema, a gig or just out shopping/for a coffee. Such schemes need to be available county-wide and should allow for on-going monitoring to ensure that the service user is getting out and participating in activities.</p>
(c)	<p>Peer Support schemes were also valued and carers noted that it would be helpful to be able to recruit from all age groups so that service users could be matched appropriately.</p>
(d)	<p>Whilst some service users would prefer to use mainstream services and would certainly benefit from greater flexibility and choice, carers were clear that there still needed to be a centre or building in each District, somewhere people could go for individual or group work, somewhere that they could feel welcome, safe, comfortable and understood. Such a centre could provide drinks and a hot meal at lunchtime and be open for wider community use. It should be fully accessible with flexible opening hours, including evenings, weekends and public holidays when people can be particularly isolated and lonely. Adjacent parking and good transport links were considered important.</p> <p>Carers did not consider it appropriate to suggest that service users who wanted to continue to attend a local</p>

		centre should band together to fund such a service through their Direct Payments. Whilst such arrangements might evolve over time, they are unlikely to be developed within the next six months to a year.
	(e)	Carers had no objection to the positive use of personalised budgets and are supportive of as much “Recovery” as possible. However they remain concerned that the “Recovery” prospects for some service users who have serious and enduring mental illnesses are being exaggerated and they are being pressurised to accept personal budgets when this may not be in their best interests. Some carers fear that this is a way of the authorities reducing care lists and distancing themselves from the clinically supervised care/support/structure that these people need. They also feel that if choice is to be meaningful some service users could benefit from existing group therapies/activities.
	(f)	Carers were very concerned that there needs to be agreed protocols in place to enable voluntary sector providers to secure immediate support for a service user who become unwell from the right health services. Staff and services users need to feel safe at all times.
	(g)	Carers were relieved to know that HPFT would retain a brokerage role - helping service user and their families to find out what suitable support and activity is available to meet their needs. The ‘map’ of services needs to be regularly updated.
	(h)	Carers were keen to emphasise the need for flexibility with a good variety of choice, one size does not fit all.
	(i)	Carers valued good care planning/discharge planning - with ongoing support and motivation and clear plans for the recovery pathway, this process to include Carers. All Service users should be given the opportunity to reach their potential. However, it needs to be recognised that moving on and not needing ongoing support may not always be possible. Sometimes the support of a good day centre can stop hospital readmission.
	(j)	Carers have valued the Community Support Workers – there was no detail about how the Community Support Services will be provided under the new proposals in the factsheet mentioned above and there has been limited focus on this to date. Carers would welcome clarity on this issue.

	Personal Budgets/Direct Payments
4	A number of carers have already found themselves having to manage Direct Payments for the person with mental health problems. This has been difficult and stressful - both because of the responsibility and because of the burdensome process and the lack of clarity about how the money could be spent. The fear is that Carers will be left to manage the Direct Payment.
5	Carers asked if it would be possible for the Personal budget to be allocated for longer period. The key to move people further along the recovery path is motivation, when the annual review is looming service users can be distracted by fact that they may not be funded for example the second year of college course If they no longer to meet FAC criteria. This could be detrimental to the service user and to the recovery programme.
	Resources
6	Carers were dismayed to learn of the level of reduction in the Day Service Budget over the period 2011 – 2013. Whilst they recognise that voluntary sector providers are likely to be able to deliver more cost effective services, Carers have serious concerns that savings of 46% (£1.572m on a budget of £3.371m) are unsustainable and will impact adversely on the Day Services/Opportunities that will be available.
7	Carers were also dismayed at the average Day Opportunity funding allocation which works out at approximately £47.00 per week (Average cost per service user p.a. £2,367.00). They believe that this sum is inadequate to purchase more than a day a week or a couple of short sessions and, as such, will leave service users without positive activity and occupation.
	Next Steps
8	Carers understand that final proposals will be considered by the County Council Cabinet in January 2012. They very much hope that the concerns outlined above will inform those proposals and look forward to further discussion, information and clarification in the interim.